Filing Company:

Primerica Life Insurance Company

TOI/Sub-TOI: L04I Individual Life - Term/L04I.500 Other

District of Columbia

Product Name: Individual Term Insurance

Project Name/Number: TermNow & Custom Advantage/PLF17DJ0

Filing at a Glance

State:

Company: Primerica Life Insurance Company

Product Name: Individual Term Insurance

State: District of Columbia

TOI: L04I Individual Life - Term

Sub-TOI: L04I.500 Other

Filing Type: Form

Date Submitted: 12/28/2017

SERFF Tr Num: PRMD-131318935 SERFF Status: Closed-APPROVED

State Tr Num:

State Status:

Co Tr Num: PLF17DJ0 F

Implementation On Approval

Date Requested:

Author(s): Valarie Harris, Latoya Nelson, Kathy Nangle, Chris Zilberfarb, Emma Kalbach, Ginny McHugh,

Sharon Lynch

Reviewer(s): John Rielley (primary)

Disposition Date: 01/04/2018
Disposition Status: APPROVED
Implementation Date: 01/04/2018

SERFF Tracking #: PRMD-131318935 State Tracking #:

Company Tracking #: PLF17DJ0 F

State: District of Columbia

TOI/Sub-TOI: L04I Individual Life - Term/L04I.500 Other

Product Name: Individual Term Insurance

Project Name/Number: TermNow & Custom Advantage/PLF17DJ0

Filing Company: Primerica Life Insurance Company

General Information

Project Name: TermNow & Custom Advantage Status of Filing in Domicile: Pending

Project Number: PLF17DJ0

Requested Filing Mode: Review & Approval Domicile Status Comments: A similar filing was submitted to

the IIPRC (Compact) on 12/15/17. Massachusetts our

domiciliary state is a member of the Compact.

Explanation for Combination/Other: Market Type: Individual Submission Type: New Submission Individual Market Type:

Overall Rate Impact: Filing Status Changed: 01/04/2018

> State Status Changed: Created By: Kathy Nangle

Date Approved in Domicile:

Submitted By: Kathy Nangle Corresponding Filing Tracking Number: PRMD-131319181

Deemer Date:

Filing Description:

SERFF Tracking #: PRMD-131318935 State Tracking #:

Company Tracking #: PLF17DJ0 F

Primerica Life Insurance Company

State: District of Columbia

L04I Individual Life - Term/L04I.500 Other

Product Name:

TOI/Sub-TOI:

Individual Term Insurance

Project Name/Number: TermNow & Custom Advantage/PLF17DJ0

RE: Primerica Life Insurance Company

NAIC No. 4750-65919 FEIN No. 04-1590590

Form Numbers: TermNow Series

PLF17DJ0DC - Term Life Insurance to Age 95 Policy

PLF17DK0 - Spouse Term Insurance Rider PLF17DL0 - Insured Term Insurance Rider

Form Numbers: Custom Advantage Series

PLF17CJ0DC - Term Life Insurance to Age 95 Policy

PLF17CK0 - Spouse Term Insurance Rider PLF17CL0 - Insured Term Insurance Rider

To Whom It May Concern:

McHugh Consulting Resources, Inc. has been requested to file the attached forms for your review and approval on behalf of Primerica Life Insurance Company. We have provided an authorization letter for your files. The forms are new and not intended to replace any other forms currently in use.

Filing Company:

This filing contains two policies and four riders.

The applications, which will be used to apply for the policies and riders below, are application form numbers SFA-60 DC and PLA-117 DC (Approved 06/19/15, SERFF Tracking Number PRMD-130073595). Application form SFA-60 DC will be used to provide polices and riders to applicants who are not current owners of Primerica Life polices, and application form PLA-117 DC will allow current policyowners to change their existing coverage.

POLICIES:

TermNow policy form number PLF17DJ0DC uses simplified underwriting, will be available for amounts up through \$300,000 (total coverage) and will be issued through the use of the above two applications. The policy will be issued with initial level premium paying periods of 10, 15, 20, 25, 30 and 35 years, with respective guarantee periods of 10, 15, 20, 25, 30 and 35 years and issue ages of 18-70, 18-65, 12-60, 18-55, 18-50, and 18-45.

Custom Advantage policy form number PLF17CJ0DC uses traditional underwriting, will be available for amounts up through \$150,000 (total coverage) and will be issued through the use of the above two applications. The policy will be issued with initial level premium paying periods of 10, 15, 20, 25, 30 and 35 years, with respective guarantee periods of 10, 15, 20, 25, 30 and 35 years and issue ages of 18-70, 18-65, 12-60, 18-55, 18-50, and 18-45.

All policy forms are for unisex term insurance.

RIDERS:

TermNow rider forms PLF17DL0 and PLF17DK0 will be used to provide the Primary Insured and Spouse Insured the same coverages as policy form PLF17DJ0DC, but instead through a rider, which may be attached to both policy forms PLF17DJ0DC and PLF17CJ0DC and previously approved policy forms.

State: District of Columbia Filing Company: Primerica Life Insurance Company

TOI/Sub-TOI: L04I Individual Life - Term/L04I.500 Other

Product Name: Individual Term Insurance

Project Name/Number: TermNow & Custom Advantage/PLF17DJ0

Custom Advantage rider forms PLF17CL0 and PLF17CK0 will be used to provide the Primary Insured and Spouse Insured the same coverages as policy form PLF17CJ0DC, but instead through a rider, which may be attached to both policy forms PLF17DJ0DC and PLF17CJ0DC and previously approved policy forms.

The filed policy and rider forms do not replace any existing forms. These forms will be offered to all applicants on a personal contact basis by our licensed agents.

These forms are in final print. The Company reserves the right to change the appearance and pagination, but not the text of these forms. No font will be less than a 10 point font size. The Company also reserves the right to change the color and/or weight of the paper on which these forms are printed, and the logo without refiling.

Thank you for your time and consideration of this filing. If you have any comments or questions, please feel free to call me at the number listed below.

Sincerely,

Kathy Nangle

McHugh Consulting Resources, Inc.

Latoya Nelson

Toll-free Telephone No. 866 / 230 - 6617

Company and Contact

Filing Contact Information

Latoya Nelson, latoya.nelson@primerica.com

1 Primerica Parkway 470-564-5915 [Phone] Duluth, GA 30099-0001 470-564-5904 [FAX]

Filing Company Information

Primerica Life Insurance Company CoCode: 65919 State of Domicile: 1 Primerica Parkway Group Code: 4750 Massachusetts

Duluth, GA 30099-0001 Group Name: Company Type: term life

(470) 564-6698 ext. [Phone] FEIN Number: 04-1590590 insurance

State ID Number:

Filing Fees

Fee Required? No Retaliatory? No

Fee Explanation:

State: District of Columbia Filing Company: Primerica Life Insurance Company

TOI/Sub-TOI: L04I Individual Life - Term/L04I.500 Other

Product Name: Individual Term Insurance

Project Name/Number: TermNow & Custom Advantage/PLF17DJ0

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	John Rielley	01/04/2018	01/04/2018

State: District of Columbia Filing Company: Primerica Life Insurance Company

TOI/Sub-TOI: L04I Individual Life - Term/L04I.500 Other

Product Name: Individual Term Insurance

Project Name/Number: TermNow & Custom Advantage/PLF17DJ0

Disposition

Disposition Date: 01/04/2018 Implementation Date: 01/04/2018

Status: APPROVED

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Statements of Variability		Yes
Supporting Document	DC Disclosures		Yes
Supporting Document	Authorization Letter	APPROVED	Yes
Form	Term Life Insurance to Age 95 Policy	APPROVED	Yes
Form	Spouse Term Insurance Rider	APPROVED	Yes
Form	Insured Term Insurance Rider	APPROVED	Yes
Form	Term Life Insurance to Age 95 Policy	APPROVED	Yes
Form	Spouse Term Insurance Rider	APPROVED	Yes
Form	Insured Term Insurance Rider	APPROVED	Yes

SERFF Tracking #: PRMD-131318935 State Tracking #: PLF17DJ0 F

State: District of Columbia Filing Company: Primerica Life Insurance Company

TOI/Sub-TOI: L04I Individual Life - Term/L04I.500 Other

Product Name: Individual Term Insurance

 Project Name/Number:
 TermNow & Custom Advantage/PLF17DJ0

Form Schedule

Lead	ead Form Number: PLF17DJ0DC							
Item	Schedule Item	Form	Form	Form	Form	Action Specific	Readability	
No.	Status	Name	Number	Туре	Action	Data	Score	Attachments
1	APPROVED 01/04/2018	Term Life Insurance to Age 95 Policy	PLF17DJ0D C	POL	Initial		51.000	PLF17DJ0DC.pdf
2	APPROVED 01/04/2018	Spouse Term Insurance Rider	PLF17DK0	POLA	Initial		52.000	PLF17DK0.pdf
3	APPROVED 01/04/2018	Insured Term Insurance Rider	PLF17DL0	POLA	Initial		52.000	PLF17DL0.pdf
4	APPROVED 01/04/2018	Term Life Insurance to Age 95 Policy	PLF17CJ0D C	POL	Initial		51.000	PLF17CJ0DC.pdf
5	APPROVED 01/04/2018	Spouse Term Insurance Rider	PLF17CK0	POLA	Initial		52.000	PLF17CK0.pdf
6	APPROVED 01/04/2018	Insured Term Insurance Rider	PLF17CL0	POLA	Initial		52.000	PLF17CL0.pdf

Form Type Legend:

I OIIII I y	pe Legena.		
ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NAP	Network Access Plan
NOC	Notice of Coverage	ОТН	Other
OUT	Outline of Coverage	PJK	Policy Jacket
POL	Policy/Contract/Fraternal Certificate	POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider
PRC	Provider Contract/Provider Addendum/Provider Leading Agreement	PRD	Provider Directory



Primerica Life **Insurance Company**

[1 Primerica Parkway] [Duluth, Georgia 30099-0001]

For Policyowner Service Call [1-800-257-4725] [www.primerica.com]

We will pay the Face Amount, in a lump sum, to the Beneficiary upon receiving due proof that the Insured died before the Expiry Date and while this Policy was in force. This agreement is subject to the provisions on the following pages, which constitute the Policy.

RIGHT TO RETURN POLICY: You may return this Policy to Us or Our authorized agent for any reason within 30 days after You receive it or any longer period as may be required by the applicable law in the state where the policy is issued for delivery. If returned, it will be considered void from the beginning. Any premium paid will be refunded.

This Policy is effective at 12:01 A.M. on the Date of Issue.

Signed on the Date of Issue at Our Executive Offices.

Hacry K Seen

TERM LIFE INSURANCE TO AGE 95

PREMIUMS ARE SUBJECT TO CHANGE

EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM OR DECREASING TERM INSURANCE TO AGE 100

NONPARTICIPATING

Primerica Life Insurance Company

(A Stock Company)

PLF17DJ0DC 11.17

TABLE OF CONTENTS

PART 1:	DEFINITIONS	Page	4
PART 2:	GENERAL PROVISIONS	Page	4
PART 3:	BENEFICIARY PROVISIONS	Page	5
PART 4:	PREMIUM PROVISIONS	Page	6
PART 5:	EXCHANGE PROVISIONS	Page	7

02101 01201110/1110/1

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [20] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [20] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[20]
			
PLF17DJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$855.00]

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$855.00]	[\$444.60]	[\$226.58]	[\$81.23]
TOTAL YEARLY COST [FIRST YEAR]	[\$855.00]	[\$889.20]	[\$906.32]	[\$974.76]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17DJ0DC Policy Page 3 [(20)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [20] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00	\$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00	\$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00 \$855.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

0210. 0.201.10...10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [10] YEARS
SCHEDULED PREMIUMS ARE GUARANTEED FOR [10] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	ANNUAL PREMIUMS* YEARS 1-[10]	
PLF17DJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$467.00]	

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$467.00]	[\$242.84]	[\$123.76]	[\$44.37]
TOTAL YEARLY COST [FIRST YEAR]		\$467.00]	Е	\$485.68]	[\$495.04]	[\$532.44]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17DJ0DC Policy Page 3 [(10)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [10] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00	\$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00 \$467.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,657.00 \$1,657.00 \$1,657.00 \$1,657.00	\$1,701.00 \$1,701.00 \$1,701.00 \$1,701.00 \$1,701.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

0210. 0.201.10...10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [15] YEARS
SCHEDULED PREMIUMS ARE GUARANTEED FOR [15] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[15]		
PLF17DJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$703.00]		

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$703.00]	[\$365.56]	[\$186.30]	[\$66.79]
TOTAL YEARLY COST [FIRST YEAR]		\$703.00]	Е	\$731.12]	[\$745.20]	[\$801.48]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17DJ0DC Policy Page 3 [(15)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [15] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00	\$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$703.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$1,657.00 \$1,657.00 \$1,657.00 \$1,657.00	\$703.00 \$703.00 \$703.00 \$703.00 \$703.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

0210. 0.201.10...10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [25] YEARS
SCHEDULED PREMIUMS ARE GUARANTEED FOR [25] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	ANNUAL PREMIUMS* YEARS 1-[25]		
PLF17DJ0DC	TERM LIFE INSURANCE TO AGE 95	<pre>[\$200.000]</pre>	Γ \$941 . 007		

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$941.00]	[\$489.32]	[\$249.37]	[\$89.40]
TOTAL YEARLY COST [FIRST YEAR]		\$941.00]	[\$978.64]	[\$997.48]	[\$1,072.80]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17DJ0DC Policy Page 3 [(25)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [25] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00	\$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00	\$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$941.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$941.00 \$941.00 \$941.00 \$941.00 \$941.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$941.00 \$941.00 \$941.00 \$941.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [30] YEARS
SCHEDULED PREMIUMS ARE GUARANTEED FOR [30] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[30]	
				
PLF17DJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$1,025.00]	

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEI	MI-ANNUAL	QUARTERLY		MONTHLY
[FIRST YEAR]	Ε	\$1,025.00]	Ε	\$533.00]	[\$271.63]	[\$97.38]
TOTAL YEARLY COST [FIRST YEAR]		\$1,025.00]	[:	\$1,066.00]	[\$1,086.52]	[\$1	,168.56]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17DJ0DC Policy Page 3 [(30)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [30] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00	\$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00	\$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00	\$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00 \$1,025.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

02101 01201110/1110/1

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [35] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [35] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[35]		
					
PLF17DJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$1,213.00]		

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY		MONTHLY
[FIRST YEAR]	[\$	1,213.00]	[\$630.76]	[\$321.45]	[\$115.24]
TOTAL YEARLY COST [FIRST YEAR]		1,213.00]	[\$1	1,261.52]	[\$1,285.80]	[\$	1,382.88]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17DJ0DC Policy Page 3 [(35)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [35] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$1,213.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

PART 1 DEFINITIONS

These are some key words used in this Policy.

- ATTAINED AGE The Issue Age plus the number of policy years since the Policy Date.
- 2. BENEFICIARY The person(s) to whom the Policy proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed (see Part 3).
- 3. DATE OF ISSUE The date shown on Page 3 on which We issue the Policy to You. This date controls the Incontestability and Suicide Exclusion provisions in Part 2.
- 4. EXPIRY DATE The date shown on Page 3. The Policy continues until this date. It is not in force on or after this date.
- 5. FACE AMOUNT The amount of insurance for each policy year which is shown in Table A on Page 3A.
- 6. INSURED The person whose life the Policy insures and who is named in the Policy Specifications.
- 7. ISSUE AGE The Insured's age on the birthday nearest the Policy Date.
- 8. NOTICE TO US Communication We have received from You which is acceptable to Us.
- 9. *POLICY DATE* The date shown on Page 3 from which premium due dates, policy anniversaries, policy years and policy months are measured.
- 10. PREMIUM CLASS The risk classification used in determining what premiums You pay.
- 11. WE, OUR or US Primerica Life Insurance Company.
- 12. YOU or YOUR The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

PART 2 GENERAL PROVISIONS

OWNER OF POLICY – This Policy belongs to You. During the Insured's life, You have all of the rights described in this Policy. You may change the Owner by Notice to Us. Unless otherwise specified the change in owner designation is effective the date the Notice to Us is signed, subject to any payments made or actions taken by Us prior to receipt of the Notice. If You die, Your rights will pass to the named contingent owner, if any. If there is no named contingent owner, Your rights will pass to the Insured.

THE CONTRACT – This Policy is issued in consideration of the application and payment of the first premium. A copy of the application and any supplemental applications (including, but not limited to, interviews and examination reports), is attached and is a part of the Policy. Together, they are the entire contract. All statements in the application, except fraudulent ones, are deemed to be representations and not warranties. No statement will void this Policy or be used in defense of a claim unless: (1) it is contained in a written application; and (2) a copy of that application is attached to this Policy.

DUPLICATE POLICY – You may request a duplicate copy of Your current Policy, that will not contain a copy of the application(s), unless requested by You. A duplicate Policy request should be sent to Us at Our Executive Offices. We will charge a fee for each duplicate Policy request.

WAIVER OR MODIFICATION – Any change to this Policy must be in writing and signed by Our President or Secretary. No agent or any other person can change this Policy or waive any of its provisions on Our behalf.

MISSTATEMENT OF AGE – If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY – We will not contest coverage under this Policy after it has been in force for two years during an Insured's life except for non–payment of premium. The two years begin on the Date of Issue of such coverage. If any person insured under the policy dies within two years from the issue date of any coverage on that person: (1) Primerica Life may contest such coverage under the policy; and (2) such coverage may be rendered void if Primerica Life determines that any information in the application related to such coverage is false, incomplete or incorrect.

SUICIDE EXCLUSION – If the Insured dies by suicide, while sane or insane, within two years of the Date of Issue of any coverage, We are only liable for the premiums paid for such coverage. For reinstated policies, the two year period begins anew.

REPLACED COVERAGE – If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Date of Issue of this Policy, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Date of Issue of this Policy, such 60–day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's policy for \$100,000 and that policy has been in force two years. If this Policy replaced the other company's policy, We would not contest this Policy for up to \$100,000. We would however, be able to contest any amount over \$100,000.

NONPARTICIPATION - This Policy does not participate in Our profits or surplus.

ASSIGNMENT – You may assign Your rights under this Policy. You must give Notice to Us of the assignment. Unless otherwise specified, the assignment is effective on the date the Notice to Us is signed, subject to any payments made or actions taken by Us prior to receipt of the Notice to Us. We are not responsible for the validity of any assignment. The interest of any Beneficiary not designated irrevocable will be subject to the rights of any assignee.

PAYMENT OF PROCEEDS – Due proof of the death of the Insured must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured. Death proceeds equal: (1) the Face Amount of this Policy as shown in Table A on Page 3A; plus (2) any rider benefits; and minus (3) any overdue premium if death occurs during a grace period. Any interest payable on death proceeds will be paid according to applicable state law.

A Beneficiary may choose to receive installments for a fixed period. If chosen, the proceeds will be paid in equal payments for a fixed period. The frequency of the installments and the fixed period will be as selected. The fixed period may not exceed 25 years. The amount of each installment will be determined from the table below. The interest paid under this option is 0.75%. This option will be available only if the amount to be paid to any Beneficiary is at least \$10,000 and is also sufficient to provide a periodic payment of at least \$25.

MONTHLY INSTALLMENTS FOR EACH \$1,000 PAYABLE

Fixed Period in Years	Monthly Amount*								
1	\$83.62	6	\$14.20	11	\$ 7.89	16	\$ 5.52	21	\$ 4.29
2	41.97	7	12.22	12	7.26	17	5.22	22	4.11
3	28.08	8	10.73	13	6.72	18	4.95	23	3.94
4	21.14	9	9.57	14	6.27	19	4.70	24	3.79
5	16.97	10	8.65	15	5.87	20	4.48	25	3.65

^{*} Multiply the monthly installment by 2.998 to obtain the quarterly installment; by 5.991 to obtain the semiannual installment; and by 11.959 to obtain the annual installment.

CANCELLATION – You may cancel Your Policy at any time by Notice to Us. Your Policy will be canceled as of the date We receive the Notice, or, if stated in Your Notice, as of a later date. If this Policy is canceled before the Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the policy month in which cancellation occurred.

PART 3 BENEFICIARY PROVISIONS

BENEFICIARY – The Beneficiary's interest will end if the Beneficiary dies before the Insured. If no primary Beneficiary is living at the Insured's death, the death proceeds will be paid to any contingent Beneficiary living at the Insured's death. The proceeds will be paid to the Owner if the Insured dies and there is no living primary or contingent Beneficiary. Proceeds will be paid to the Insured's estate if there is no living Beneficiary or Owner. We may rely on a sworn statement by any responsible person to discover the identity or nonexistence of any Beneficiary not identified by name.

CHANGE OF BENEFICIARY – You can change a Beneficiary by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocable on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date of the Notice to Us unless otherwise specified by You. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

PART 4 PREMIUM PROVISIONS

PREMIUM PAYMENTS – Premiums are payable to Us in advance. The first premium is due on or before delivery of this Policy and may be paid to Us through one of Our agents. Subsequent premiums must be paid to Us at Our Executive Offices and are due at 12, 6, 3 or 1 Policy month intervals, depending on the premium payment option You chose in the application. The premiums shown on Page 3A are for the premium payment option You chose. Premium amounts for all available payment options are on Page 3. Payment options other than annual result in a higher total annualized premium. You may change the premium payment option for future premium payments upon Notice to Us. Premiums are not due for any period after the Insured's death or the Expiry Date.

If a part of the total premium is no longer payable under the provisions of the Policy or a Rider, the total premium will be adjusted accordingly.

CHANGES IN PREMIUM INITIATED BY YOUR REQUEST – Changes to a benefit amount, Premium Class (e.g. Preferred), or any riders, including adding or deleting riders, requested by You and approved by Us, or riders expiring by their own terms, will change Your scheduled and maximum premiums. Because of higher unit costs at lower insurance coverage amounts, reductions or deletions in policy or rider coverage, including those that result in a change to a Premium Class because minimum insurance amounts for a Premium Class are no longer met, may cause an increase or decrease in premium. Changes to issue age after REINSTATEMENT as described below may also increase Your scheduled and maximum premiums.

PREMIUM CHANGES BY COMPANY – Premiums for this Policy as originally issued will be the scheduled premiums shown on Pages 3 and 3A, unless changed by Us, or You as described above. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the then in effect maximum premiums shown on Page 3A. Any such change will apply uniformly to all policies of this form issued to Insureds having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses, except as may occur in connection with CHANGES IN PREMIUM INITIATED BY YOUR REQUEST, or a REINSTATEMENT which results in changes in insurance age(s).

If We change scheduled premiums, other than as described above in *CHANGES IN PREMIUM INITIATED BY YOUR REQUEST*, We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new policy specifications pages to reflect any changes in scheduled premiums.

GRACE PERIOD – This Policy has a 31 day grace period. This means that, except for the first premium, if a premium is not paid on or before the date it is due, it may be paid during the next 31 days. No interest will be charged for this late payment. During this 31 day period, the Policy will stay in force. If You do not pay the premium by the end of the grace period, this Policy will automatically terminate.

REINSTATEMENT – If this Policy terminates due to unpaid premium, it may be reinstated within three years after the date the first unpaid premium was due, if prior to the Expiry Date.

To reinstate this Policy, We must have evidence of insurability satisfactory to Us for all persons to be covered and payment of all unpaid premiums, plus interest at 6% per year compounded annually. The Policy Date of the reinstated policy will remain the original Policy Date. The reinstated date is the date We approve the reinstatement application.

Another option for reinstating this Policy is by providing evidence of insurability satisfactory to Us for all persons to be covered and payment of one month's premium. The Policy Date of the reinstated policy will be adjusted based on the length of time Your policy was lapsed. Reinstatement in this manner may result in changes in insurance age(s) and premiums may increase. You will be notified by Us if there is a premium increase. The reinstated date is the date We approve the reinstatement application.

The reinstated Policy shall be incontestable to the same extent as indicated in the above Incontestability Provision, from the reinstated date based only on statements in the reinstatement application, unless the original contestable period has not expired. This means that the two year contestable period will begin anew with the reinstatement.

PART 5 EXCHANGE PROVISIONS

EXCHANGE AT ATTAINED AGE – This Policy provides coverage until the Expiry Date, or You may exchange this Policy at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan or the Decreasing Term Insurance to Age 100 Plan described below. If the exchange is for the same class of insurance, we will not require evidence of insurability. The new plan will take effect on the exchange date and this Policy will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by the Date of Issue of this Policy. We will issue either revised policy specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Policy is in force on the exchange date; and (6) premiums for Your current Policy are not being waived under any rider attached to this Policy. The exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date.

ANNUAL INCREASING PREMIUM TERM INSURANCE TO AGE 100 PLAN – For this plan, the face amount remains level while premiums increase each year with Attained Age. Annual premiums per \$1,000 face amount for this plan are shown below in Table B. We reserve the right to change the scheduled premiums shown in Table B. We will not change the premiums to more than the maximum premiums shown in Table B.

TABLE B

SELECT AND NON-TOBACCO, NON-NICOTINE

ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT

THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.

\$149,999	\$150,000 -			MAXIMUM		SCHEDULED				MAXIMUM
and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE AMOUNTS	AGE	\$149,999 and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE AMOUNTS
\$ 1.13	\$ 1.10	\$ 0.99	\$ 0.90	\$ 1.64	60	\$ 11.55	\$ 10.43	\$ 9.68	\$ 9.24	\$ 16.01
1.13	1.10	0.99	0.90	1.64	61	12.75	11.52	10.69	10.20	17.37
1.13	1.10	0.99	0.90	1.64	62	14.09	12.73	11.81	11.27	18.87
1.13	1.10	0.99	0.90	1.64	63	15.49	13.99	12.99	12.39	20.40
1.13	1.10	0.99	0.90	1.64	64	17.01	15.36	14.27	13.60	22.07
1.13	1.10	0.99	0.90	1.64	65	18.67	16.87	15.67	14.94	23.91
1.13	1.10	0.99	0.90	1.64	66	20.40	18.43	17.11	16.33	25.94
1.13	1.10	0.99	0.90	1.64	67	22.30	20.29	18.71	17.85	28.17
1.13	1.10	0.99	0.90	1.64	68	24.41	22.36	20.48	19.53	30.66
1.13	1.10	0.99	0.90	1.64	69	26.03	24.02	21.83	20.82	33.38
1.13	1.10	0.99	0.90	1.64	70	28.64	26.61	24.03	22.91	36.39
1.13	1.10	0.99	0.90	1.64	71	31.46	29.45	26.51	25.24	39.86
1.13	1.10	0.99	0.90	1.64	72	34.48	32.49	29.18	27.73	43.73
1.13	1.10	0.99	0.90	1.64	73	38.48	35.82	32.10	30.44	47.92
1.19	1.16	1.04	0.95	1.77	74	42.92	39.50	35.31	33.42	52.53
1.26	1.22	1.09	1.00	1.93	75	47.89	43.57	38.89	36.74	57.64
1.34	1.29	1.17	1.07	2.06	76	53.49	48.12	42.86	40.42	63.24
1.45	1.39	1.26	1.15	2.23	77	59.73	53.15	47.28	44.51	69.40
1.51	1.45	1.31	1.21	2.31	78	66.68	58.71	52.16	49.02	76.22
1.63	1.56	1.42	1.30	2.44	79	74.36	64.79	57.52	53.94	83.57
1.77	1.69	1.54	1.42	2.60	80	82.78	71.41	63.35	59.32	91.80
1.91	1.81	1.65	1.53	2.75	81	91.98	78.57	69.69	65.14	102.96
2.07	1.95	1.78	1.66	2.92	82	101.90	86.21	76.33	71.37	115.55
2.26	2.11	1.93	1.80	3.14	83	112.60	94.37	83.45	78.04	128.10
2.45	2.29	2.09	1.96	3.40	84	124.55	103.42	91.37	85.47	141.97
2.67	2.48	2.28	2.14	3.70	85	137.75	113.36	100.11	93.68	157.59
2.92	2.70	2.48	2.34	4.05	86	152.25	124.20	109.67	102.67	171.76
3.18	2.92	2.70	2.55	4.48	87	168.13	135.98	120.14	112.53	193.09
3.48	3.17	2.93	2.78	4.95	88	185.40	148.70	131.52	123.23	215.37
3.77	3.42	3.16	3.01	5.47	89	200.93	162.19	143.68	134.72	239.13
4.10	3.71	3.44	3.29	6.08	90	216.96	176.25	156.48	146.80	261.03
4.54	4.09	3.80	3.63	6.75	91	233.48	189.73	169.95	159.55	272.10
5.03	4.54	4.22	4.02	7.51	92	250.52	203.64	184.12	172.99	293.89
5.56	5.03	4.67	4.45	8.33	93	268.04	217.95	199.06	187.16	326.21
6.13	5.54	5.13	4.90	9.19	94	286.05	232.67	214.78	202.11	367.01
6.78	6.12	5.69	5.42	10.13	95	304.58	247.74	228.70	215.21	417.38
7.56	6.83	6.35	6.05	11.21	96	324.95	264.31	243.98	229.59	465.21
8.43	7.61	7.07	6.74	12.33	97	389.85	317.11	292.73	275.46	514.45
9.41	8.50	7.90	7.52	13.54	98	412.62	335.61	309.81	291.53	522.89
10.45	9.43	8.76	8.35	14.75	99	435.91	354.57	327.30	307.99	551.12
	\$1.13 1.13 1.13 1.13 1.13 1.13 1.13 1.13	\$1.13 \$1.10 1.13 1.10 1.13 1.10 1.14 1.10 1.15 1.10 1.17 1.10 1.18 1.10 1.19 1.16 1.26 1.22 1.34 1.29 1.45 1.39 1.51 1.45 1.63 1.56 1.77 1.69 1.91 1.81 2.07 1.95 2.26 2.11 2.45 2.29 2.67 2.48 2.92 2.70 3.18 2.92 3.48 3.17 3.77 3.42 4.10 3.71 4.54 4.09 5.03 4.54 5.56 5.03 6.13 5.54 6.78 6.12 7.56 6.83 8.43 7.61 9.41 8.50	\$1.13 \$1.10 \$0.99 1.13 1.10 1.00 0.99 1.13 1.10 1.00 0.99 1.13 1.10 1.00 0.99 1.10 1.10 1.00 0.99 1.110 1.10 1.	\$1.13	\$1.13	\$1.13	\$1.13	\$1.13	\$1.13	\$1.13

NOTE: AGE IS ATTAINED AGE.

TABLE B (CONT'D)

TOBACCO, NICOTINE

ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.

		SCHE	DULED		MAXIMUM		SCHEDULED				MAXIMUM
AGE	\$149,999 and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE AMOUNTS	AGE	\$149,999 and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$ 1.83	\$ 1.80	\$ 1.56	\$ 1.50	\$ 2.53	60	\$19.39	\$18.21	\$17.02	\$16.61	\$31.75
21	1.83	1.80	1.56	1.50	2.53	61	21.42	20.11	18.80	18.36	34.44
22	1.83	1.80	1.56	1.50	2.53	62	23.72	22.27	20.81	20.34	37.47
23	1.83	1.80	1.56	1.50	2.53	63	26.12	24.53	22.93	22.39	40.53
24	1.83	1.80	1.56	1.50	2.53	64	28.71	26.96	25.20	24.61	43.78
25	1.83	1.80	1.56	1.50	2.53	65	31.57	29.64	27.71	27.06	47.34
26	1.83	1.80	1.56	1.50	2.53	66	34.31	32.21	30.12	29.41	51.14
27	1.83	1.80	1.56	1.50	2.53	67	37.39	35.10	32.81	32.05	55.42
28	1.83	1.80	1.56	1.50	2.53	68	40.77	38.28	35.78	34.95	60.14
29	1.83	1.80	1.56	1.50	2.53	69	43.30	40.65	38.00	37.12	65.28
30	1.83	1.80	1.56	1.50	2.53	70	47.64	44.73	41.81	40.84	71.03
31	1.83	1.80	1.56	1.50	2.53	71	55.84	51.06	46.58	45.40	77.60
32	1.83	1.80	1.56	1.50	2.53	72	62.06	58.05	51.73	50.33	84.88
33	1.83	1.80	1.56	1.50	2.53	73	69.59	65.86	57.40	55.74	92.75
34	1.90	1.86	1.63	1.56	2.76	74	78.39	74.62	63.68	61.72	101.42
35	2.03	1.99	1.74	1.68	3.06	75	88.17	84.54	70.71	68.40	110.21
36	2.16	2.11	1.85	1.77	3.32	76	98.65	95.31	78.54	75.84	119.83
37	2.34	2.28	2.01	1.94	3.62	77	109.60	105.60	87.28	84.14	130.23
38	2.48	2.41	2.12	2.05	3.82	78	121.09	116.33	96.95	93.30	141.47
39	2.66	2.59	2.29	2.22	4.09	79	133.44	127.80	107.61	103.38	153.68
40	2.87	2.76	2.47	2.39	4.35	80	147.18	140.53	119.26	114.39	166.89
41	3.10	2.99	2.69	2.59	4.67	81	162.73	154.91	131.94	126.35	185.34
42	3.38	3.25	2.92	2.82	5.04	82	180.55	169.89	145.54	139.16	205.47
43	3.69	3.54	3.20	3.10	5.49	83	200.07	184.74	160.15	152.90	225.27
44	4.01	3.84	3.49	3.38	6.00	84	222.99	201.10	176.39	168.15	246.65
45	4.37	4.16	3.79	3.69	6.60	85	245.89	218.97	194.30	184.97	268.36
46	4.71	4.48	4.11	3.99	7.27	86	271.91	238.36	213.95	203.38	286.80
47	5.13	4.87	4.47	4.35	8.12	87	296.98	259.26	235.36	223.42	315.55
48	5.63	5.32	4.92	4.80	9.17	88	325.31	281.68	258.60	245.15	344.48
49	6.18	5.83	5.41	5.28	10.35	89	352.24	305.26	283.39	268.28	373.81
50	6.79	6.37	5.95	5.81	11.66	90	383.25	329.61	309.36	292.49	398.01
51	7.53	7.07	6.61	6.45	13.09	91	416.32	354.71	336.56	317.79	416.42
52	8.35	7.84	7.33	7.16	14.66	92	452.40	380.59	365.00	344.21	452.50
53	9.26	8.69	8.12	7.93	16.34	93	493.27	407.21	394.71	371.77	493.37
54	10.30	9.67	9.04	8.82	18.19	94	543.40	434.59	425.69	400.47	543.50
55	11.44	10.73	10.04	9.80	20.14	95	566.60	462.73	453.26	426.40	568.43
56	12.74	11.96	11.18	10.92	22.25	96	594.61	492.93	482.84	454.23	626.44
57	14.22	13.35	12.47	12.19	24.51	97	655.20	566.74	555.14	522.24	684.72
58	15.75	14.78	13.82	13.50	26.72	98	738.53	599.81	587.52	552.72	739.53
59	17.50	16.42	15.36	15.00	29.18	99	780.25	633.69	620.72	583.94	781.25
				NC	TF: AGE IS	ΔΤΤΑΙ	NED AGE				

NOTE: AGE IS ATTAINED AGE.

DECREASING TERM INSURANCE TO AGE 100 PLAN – For this plan, the face amount decreases while premiums remain level. The face amount decreases each year with Attained Age, as shown in Table C below. We reserve the right to change the scheduled face amount, but not lower than the minimum face amount as determined from Table C.

TABLE C SELECT AND NON-TOBACCO, NON-NICOTINE FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN MINUS THE ANNUAL POLICY FEE OF \$75

		SCHE	DULED		MINIMUM		SCHEDULED				MINIMUM
405	\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE	405	\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE
20 21 22 23 24	\$88,495 88,495 88,495 88,495 88,495 88,495	\$249,999 \$90,909 90,909 90,909 90,909 90,909	\$499,999 \$101,010 101,010 101,010 101,010 101,010	\$111,111 111,111 111,111 111,111 111,111	\$60,975 60,975 60,975 60,975 60,975 60,975	60 61 62 63 64	\$8,658 7,843 7,097 6,455 5,878	\$249,999 \$9,587 8,680 7,855 7,147 6,510	\$499,999 \$10,330 9,354 8,467 7,698 7,007	\$10,822 9,803 8,873 8,071 7,352	\$6,246 5,757 5,299 4,901 4,531
25	88,495	90,909	101,010	111,111	60,975	65	5,356	5,927	6,381	6,693	4,182
26	88,495	90,909	101,010	111,111	60,975	66	4,901	5,425	5,844	6,123	3,855
27	88,495	90,909	101,010	111,111	60,975	67	4,484	4,928	5,344	5,602	3,549
28	88,495	90,909	101,010	111,111	60,975	68	4,096	4,472	4,882	5,120	3,261
29	88,495	90,909	101,010	111,111	60,975	69	3,841	4,163	4,580	4,803	2,995
30	88,495	90,909	101,010	111,111	60,975	70	3,491	3,757	4,161	4,364	2,748
31	88,495	90,909	101,010	111,111	60,975	71	3,178	3,395	3,772	3,961	2,508
32	88,495	90,909	101,010	111,111	60,975	72	2,900	3,077	3,427	3,606	2,286
33	88,495	90,909	101,010	111,111	60,975	73	2,598	2,791	3,115	3,285	2,086
34	84,033	86,206	96,153	105,263	56,497	74	2,329	2,531	2,832	2,992	1,903
35	79,365	81,967	91,743	100,000	51,813	75	2,088	2,295	2,571	2,721	1,734
36	74,626	77,519	85,470	93,457	48,543	76	1,869	2,078	2,333	2,474	1,581
37	68,965	71,942	79,365	86,956	44,843	77	1,674	1,881	2,115	2,246	1,440
38	66,225	68,965	76,335	82,644	43,290	78	1,499	1,703	1,917	2,039	1,311
39	61,349	64,102	70,422	76,923	40,983	79	1,344	1,543	1,738	1,853	1,196
40	56,497	59,171	64,935	70,422	38,461	80	1,208	1,400	1,578	1,685	1,089
41	52,356	55,248	60,606	65,359	36,363	81	1,087	1,272	1,434	1,535	971
42	48,309	51,282	56,179	60,240	34,246	82	981	1,159	1,310	1,401	865
43	44,247	47,393	51,813	55,555	31,847	83	888	1,059	1,198	1,281	780
44	40,816	43,668	47,846	51,020	29,411	84	802	966	1,094	1,170	704
45	37,453	40,322	43,859	46,728	27,027	85	725	882	998	1,067	634
46	34,246	37,037	40,322	42,735	24,691	86	656	805	911	973	582
47	31,446	34,246	37,037	39,215	22,321	87	594	735	832	888	517
48	28,735	31,545	34,129	35,971	20,202	88	539	672	760	811	464
49	26,525	29,239	31,645	33,222	18,281	89	497	616	695	742	418
50	24,390	26,954	29,069	30,395	16,447	90	460	567	639	681	383
51	22,026	24,449	26,315	27,548	14,814	91	428	527	588	626	367
52	19,880	22,026	23,696	24,875	13,315	92	399	491	543	578	340
53	17,985	19,880	21,413	22,471	12,004	93	373	458	502	534	306
54	16,313	18,050	19,493	20,408	10,881	94	349	429	465	494	272
55	14,749	16,339	17,574	18,450	9,871	95	328	403	437	464	239
56	13,227	14,641	15,748	16,528	8,920	96	307	378	409	435	214
57	11,862	13,140	14,144	14,836	8,110	97	256	315	341	363	194
58	10,626	11,764	12,658	13,297	7,385	98	242	297	322	343	191
59	9,569	10,604	11,415	11,976	6,779	99	229	282	305	324	181

NOTE: AGE IS ATTAINED AGE.

TABLE C (CONT'D)

TOBACCO, NICOTINE

FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN MINUS THE ANNUAL POLICY FEE OF \$75

		SCHE	DULED		MINIMUM			SCHEE	ULED		MINIMUM
AGE	\$149,999 and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE	AGE	\$149,999 and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20 21 22 23 24	\$54,644 54,644 54,644 54,644 54,644	\$55,555 55,555 55,555 55,555 55,555 55,555	\$64,102 64,102 64,102 64,102 64,102	\$66,666 66,666 66,666 66,666 66,666	\$39,525 39,525 39,525 39,525 39,525 39,525	60 61 62 63 64	\$5,157 4,668 4,215 3,828 3,483	\$5,491 4,972 4,490 4,076 3,709	\$5,875 5,319 4,805 4,361 3,968	\$6,020 5,446 4,916 4,466 4,063	\$3,149 2,903 2,668 2,467 2,284
25 26 27 28 29	54,644 54,644 54,644 54,644 54,644	55,555 55,555 55,555 55,555 55,555	64,102 64,102 64,102 64,102 64,102	66,666 66,666 66,666 66,666	39,525 39,525 39,525 39,525 39,525	65 66 67 68 69	3,167 2,914 2,674 2,452 2,309	3,373 3,104 2,849 2,612 2,460	3,608 3,320 3,047 2,794 2,631	3,695 3,400 3,120 2,861 2,693	2,112 1,955 1,804 1,662 1,531
30	54,644	55,555	64,102	66,666	39,525	70	2,099	2,235	2,391	2,448	1,407
31	54,644	55,555	64,102	66,666	39,525	71	1,790	1,958	2,146	2,202	1,288
32	54,644	55,555	64,102	66,666	39,525	72	1,611	1,722	1,933	1,986	1,178
33	54,644	55,555	64,102	66,666	39,525	73	1,436	1,518	1,742	1,794	1,078
34	52,631	53,763	61,349	64,102	36,231	74	1,275	1,340	1,570	1,620	985
35	49,261	50,251	57,471	59,523	32,679	75	1,134	1,182	1,414	1,461	907
36	46,296	47,393	54,054	56,497	30,120	76	1,013	1,049	1,273	1,318	834
37	42,735	43,859	49,751	51,546	27,624	77	912	946	1,145	1,188	767
38	40,322	41,493	47,169	48,780	26,178	78	825	859	1,031	1,071	706
39	37,593	38,610	43,668	45,045	24,449	79	749	782	929	967	650
40	34,843	36,231	40,485	41,841	22,988	80	679	711	838	874	599
41	32,258	33,444	37,174	38,610	21,413	81	614	645	757	791	539
42	29,585	30,769	34,246	35,460	19,841	82	553	588	687	718	486
43	27,100	28,248	31,250	32,258	18,214	83	499	541	624	654	443
44	24,937	26,041	28,653	29,585	16,666	84	448	497	566	594	405
45	22,883	24,038	26,385	27,100	15,151	85	406	456	514	540	372
46	21,231	22,321	24,330	25,062	13,755	86	367	419	467	491	348
47	19,493	20,533	22,371	22,988	12,315	87	336	385	424	447	316
48	17,761	18,796	20,325	20,833	10,905	88	307	355	386	407	290
49	16,181	17,152	18,484	18,939	9,661	89	283	327	352	372	267
50	14,727	15,698	16,806	17,211	8,576	90	260	303	323	341	251
51	13,280	14,144	15,128	15,503	7,639	91	240	281	297	314	240
52	11,976	12,755	13,642	13,966	6,821	92	221	262	273	290	220
53	10,799	11,507	12,315	12,610	6,119	93	202	245	253	268	202
54	9,708	10,341	11,061	11,337	5,497	94	184	230	234	249	183
55	8,741	9,319	9,960	10,204	4,965	95	176	216	220	234	175
56	7,849	8,361	8,944	9,157	4,494	96	168	202	207	220	159
57	7,032	7,490	8,019	8,203	4,079	97	152	176	180	191	146
58	6,349	6,765	7,235	7,407	3,742	98	135	166	170	180	135
59	5,714	6,090	6,510	6,666	3,427	99	128	157	161	171	128
				NO	OTE: AGE IS A	ATTA	NED AGE.				

RIDERS - The continuation in the new plan of any benefits provided by Rider(s) attached to this Policy which are not exchanged will be subject to the provision for continuation, if any, in each Rider. The premium for any Rider continued after exchange will be added to the premium for the new plan.

RIDER EXCHANGE AT DEATH OF INSURED - If any Insured Spouse Riders attached to this Policy are in force upon the Insured's death, they may be exchanged for a new policy to be owned by the Insured Spouse in accordance with the Exchange provision in each rider except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive Notice to Us for the exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death. We will pay to the Beneficiary of the Rider the insurance in force under the Rider at the Insured's death, less any overdue premium for the Rider.



TERM LIFE INSURANCE TO AGE 95

PREMIUMS ARE SUBJECT TO CHANGE

EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM OR DECREASING TERM INSURANCE TO AGE 100

NONPARTICIPATING

PLF17DA0DC 11.17

PRIMERICA LIFE INSURANCE COMPANY

Executive Offices: [1 Primerica Parkway, Duluth, Georgia 30099-0001]

SPOUSE TERM INSURANCE RIDER

PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of Your Policy. This Rider is subject to the provisions of the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control. This Rider does not have cash values or loan values.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured Spouse died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY – The person(s) to whom the rider proceeds are payable upon the death of the Insured Spouse. Unless otherwise stated in the application or by Notice to Us (See Change of Beneficiary Provision, below), the Beneficiary of this Rider will be the Insured, if living; otherwise the estate of the Insured Spouse.

INSURED - The person whose life the Policy insures and who is named in the Policy Specifications.

INSURED SPOUSE – The person whose life this Rider insures. This person is the spouse of the Insured and is named in the Rider Specifications.

NOTICE TO US - Communication We have received from You which is acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE – The Insured Spouse's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE – The date shown on Rider Page 4 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE – The date shown on Rider Page 4 on which We issue the Rider to You. This date controls the below Incontestability and Suicide Exclusion provisions.

RIDER EXPIRY DATE - The date shown on Rider Page 4. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 4A.

RIDER ISSUE AGE - The Insured Spouse's age on the birthday nearest the Rider Date.

GENERAL PROVISIONS

CONSIDERATION – This Rider is issued in consideration of: (1) the application for this Rider and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS – Premiums for this Rider are payable in addition to the premiums for the Policy. The premiums shown on Rider Page 4A are for the premium payment option You chose. Total premium amounts for all available payment options are on Policy Page 3. Payment options other than annual result in a higher total annualized premium. You may change the premium payment option for future premium payments upon Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. Premiums for this Rider are not due for any period after the Insured Spouse's death, the Rider Expiry Date or when this Rider terminates.

PLF17DK0 11.17

CHANGES IN PREMIUM INITIATED BY YOUR REQUEST – Changes to a benefit amount, Premium Class (e.g. Preferred), or any riders, including adding or deleting riders, requested by You and approved by Us, or riders expiring by their own terms, will change Your scheduled and maximum premiums. Because of higher unit costs at lower insurance coverage amounts, reductions or deletions in policy or rider coverage, including those that result in a change to a Premium Class because minimum insurance amounts for a Premium Class are no longer met, may cause an increase or decrease in premium. Changes to issue age after REINSTATEMENT as described below may also increase Your scheduled and maximum premiums.

PREMIUM CHANGES BY COMPANY – Premiums for this Rider as originally issued will be the scheduled premiums shown on Rider Pages 4 and 4A, unless changed by Us, or You as described above. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the then in effect maximum premiums shown on Rider Page 4A. Any such change will apply uniformly to all riders of this form issued to Insured Spouses having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses, except as may occur in connection with CHANGES IN PREMIUM INITIATED BY YOUR REQUEST, or a REINSTATEMENT which results in changes in insurance age(s).

If We change scheduled premiums, other than as described above in *CHANGES IN PREMIUM INITIATED BY YOUR REQUEST*, We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

INCONTESTABILITY – We will not contest coverage under this Rider after it has been in force for two years during an Insured Spouse's life except for non–payment of premium. The two years begin on the Rider Date of Issue of such coverage. If any person insured under the Rider dies within two years from the issue date of any coverage on that person: (1) Primerica Life may contest such coverage under the Rider; and (2) such coverage may be rendered void if Primerica Life determines that any information in the application related to such coverage is false, incomplete or incorrect.

SUICIDE EXCLUSION – If the Insured Spouse dies by suicide, while sane or insane, within two years of the Date of Issue of any coverage, We are only liable for the premiums paid for such coverage. For reinstated riders, the two year period begins anew.

REPLACED COVERAGE – If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured Spouse's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60–day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, the Insured Spouse is insured under another company's policy for \$100,000 and that policy has been in force two years. If this Rider replaced the other company's policy, We would not contest this Rider for up to \$100,000. We would, however, be able to contest any amount over \$100,000.

NONPARTICIPATION – This Rider does not participate in Our profits or surplus.

CHANGE OF BENEFICIARY – You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured Spouse is alive. A Beneficiary designated irrevocable on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date of the Notice to Us, unless otherwise specified by You. If the Insured Spouse dies before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION – This Rider terminates and is no longer in force: (1) upon cancellation; (2) upon termination of the policy; (3) upon the death of the Insured (subject to Exchange at Death of Insured Provision); (4) upon nonpayment of premiums, in accordance with the provisions of the policy; (5) upon exchange of this Rider; or (6) on the Rider Expiry Date.

REINSTATEMENT – If termination occurs due to unpaid premium, this Rider may be reinstated subject to the provisions of the Policy.

CANCELLATION – You may cancel this Rider at any time by Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION – You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan or the Decreasing Term Insurance to Age 100 Plan described in the Policy. The new plan will be issued at Our premium rates for that plan for the Insured Spouse's Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 4. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised rider specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured Spouse is alive; (5) this Rider is in force on the exchange date; and (6) premiums for Your current Rider are not being waived.

OPTIONS AT DEATH OF INSURED – Upon the death of the Primary Insured, premiums actually paid for this Rider beyond the policy month in which death occurred will be paid to the Primary Insured's beneficiary(ies). Additionally, if this Rider is in force at the Insured's death, the Insured Spouse may exchange this Rider for a new policy in accordance with the above Exchange Provision or for a new policy of the same plan type and duration, with the same issue age, premium class, and face amount as this Rider. If a new policy of the same plan type is obtained and a Spouse Waiver of Premium Rider is in force at the Insured's death, the new policy of the same plan type will include, unless otherwise directed by the Insured Spouse, a Waiver of Premium Rider with the same issue age and premium class as the Spouse Waiver of Premium Rider. If the Insured was also the Owner, then the Insured Spouse will own the new policy, notwithstanding any Contingent Owner. The exchange must be made within 60 days after the Insured's death. The issue date of the new policy will be the day We receive Notice to Us for the exchange. However, the plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. If the Insured Spouse dies before exchange takes effect and within 60 days after the Insured's death, We will pay to the Beneficiary of this Rider the insurance in force under this Rider at the Insured's death, less any premium due.

EXCHANGE AT POLICY EXPIRY – If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the issue date of the policy will be the day We receive Notice to Us for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.

Stacy & Slen [Secretary]

[President 1

Vaid (fradwick



POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [20] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [20] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[20]
PLF17DK0	SPOUSE TERM RIDER [20]	[\$200,000]	[\$780.00]

PLF17DK0 Rider Page 4 [(20)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [20] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DK0 Rider Page 4A [(20)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [10] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [10] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[10]
PLF17DK0	SPOUSE TERM RIDER [10]	[\$200,000]	[\$392.00]

PLF17DK0 Rider Page 4 [(10)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [10] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00	\$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$1,626.00 \$1,626.00 \$1,626.00 \$1,626.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DK0 Rider Page 4A [(10)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [15] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [15] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[15]
PLF17DK0	SPOUSE TERM RIDER [15]	[\$200,000]	[\$628.00]

PLF17DK0 Rider Page 4 [(15)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [15] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TARLE

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43 44	\$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00	\$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$628.00 \$628.00 \$628.00 \$628.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DK0 Rider Page 4A [(15)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [25] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [25] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[25]
PLF17DK0	SPOUSE TERM RIDER [25]	[\$200,000]	[\$866.00]

PLF17DK0 Rider Page 4 [(25)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [25] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$866.00 \$866.00 \$866.00 \$866.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$866.00 \$866.00 \$866.00 \$866.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DK0 Rider Page 4A [(25)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [30] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [30] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[30]
PLF17DK0	SPOUSE TERM RIDER [30]	[\$200,000]	[\$950.00]

PLF17DK0 Rider Page 4 [(30)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [30] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DK0 Rider Page 4A [(30)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [35] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [35] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[35]
			
PLF17DK0	SPOUSE TERM RIDER [35]	[\$200,000]	[\$1,138.00]

PLF17DK0 Rider Page 4 [(35)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [35] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



ΤΔΒΙΕ Δ

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DK0 Rider Page 4A [(35)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PRIMERICA LIFE INSURANCE COMPANY

Executive Offices: [1 Primerica Parkway, Duluth, Georgia 30099-0001]

INSURED TERM INSURANCE RIDER

PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of Your Policy. This Rider is subject to the provisions of the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control. This Rider does not have cash values or loan values.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY – The person(s) to whom the rider proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed. (See Change of Beneficiary Provision, below)

INSURED - The person whose life the Policy insures and who is named in the Policy and Rider Specifications.

NOTICE TO US - Communication We have received from You which is acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE – The date shown on Rider Page 4 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE – The date shown on Rider Page 4 on which We issue the Rider to You. This date controls the below Incontestability and Suicide Exclusion provisions.

RIDER EXPIRY DATE - The date shown on Rider Page 4. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 4A.

RIDER ISSUE AGE – The Insured's age on the birthday nearest the Rider Date.

GENERAL PROVISIONS

CONSIDERATION – This Rider is issued in consideration of: (1) the application for this Rider and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS – Premiums for this Rider are payable in addition to the premiums for the Policy. The premiums shown on Rider Page 4A are for the premium payment option You chose. Total premium amounts for all available payment options are on Policy Page 3. Payment options other than annual result in a higher total annualized premium. You may change the premium payment option for future premium payments upon Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. Premiums for this Rider are not due for any period after the Insured's death, the Rider Expiry Date or when this Rider terminates.

PLF17DL0 11.17

CHANGES IN PREMIUM INITIATED BY YOUR REQUEST – Changes to a benefit amount, Premium Class (e.g. Preferred), or any riders, including adding or deleting riders, requested by You and approved by Us, or riders expiring by their own terms, will change Your scheduled and maximum premiums. Because of higher unit costs at lower insurance coverage amounts, reductions or deletions in policy or rider coverage, including those that result in a change to a Premium Class because minimum insurance amounts for a Premium Class are no longer met, may cause an increase or decrease in premium. Changes to issue age after REINSTATEMENT as described below may also increase Your scheduled and maximum premiums.

PREMIUM CHANGES BY COMPANY – Premiums for this Rider as originally issued will be the scheduled premiums shown on Rider Pages 4 and 4A, unless changed by Us, or You as described above. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the then in effect maximum premiums shown on Rider Page 4A. Any such change will apply uniformly to all riders of this form issued to Insureds having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses, except as may occur in connection with CHANGES IN PREMIUM INITIATED BY YOUR REQUEST, or a REINSTATEMENT which results in changes in insurance age(s).

If We change scheduled premiums, other than as described above in *CHANGES IN PREMIUM INITIATED BY YOUR REQUEST*, We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

INCONTESTABILITY – We will not contest coverage under this Rider after it has been in force for two years during an Insured's life except for non–payment of premium. The two years begin on the Rider Date of Issue of such coverage. If any person insured under the Rider dies within two years from the issue date of any coverage on that person: (1) Primerica Life may contest such coverage under the Rider; and (2) such coverage may be rendered void if Primerica Life determines that any information in the application related to such coverage is false, incomplete or incorrect.

SUICIDE EXCLUSION – If the Insured dies by suicide, while sane or insane, within two years of the Date of Issue of any coverage, We are only liable for the premiums paid for such coverage. For reinstated riders, the two year period begins anew.

REPLACED COVERAGE – If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60–day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, the Insured is insured under another company's policy for \$100,000 and that policy has been in force two years. If this Rider replaced the other company's policy, We would not contest this Rider for up to \$100,000. We would, however, be able to contest any amount over \$100,000.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

CHANGE OF BENEFICIARY – You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocable on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date of the Notice to Us, unless otherwise specified by You. If the Insured dies before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION – This Rider terminates and is no longer in force: (1) upon cancellation; (2) upon termination of the policy; (3) upon the death of the Insured; (4) upon nonpayment of premiums, in accordance with the provisions of the policy; (5) upon exchange of this Rider; or (6) on the Rider Expiry Date.

REINSTATEMENT – If termination occurs due to unpaid premium, this Rider may be reinstated subject to the provisions of the Policy.

CANCELLATION – You may cancel this Rider at any time by Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION – You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan or the Decreasing Term Insurance to Age 100 Plan described in the Policy. The new plan will be issued at Our premium rates for that plan for the Insured's Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 4. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised rider specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Rider is in force on the exchange date; and (6) premiums for Your current Rider are not being waived.

EXCHANGE AT POLICY EXPIRY – If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the issue date of the policy will be the day We receive Notice to Us for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.

Stacy & Slen
[Secretary]

[President]



POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [20] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [20] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[20]
PLF17DL0	INSURED TERM RIDER [20]	[\$200,000]	[\$780.00]

PLF17DL0 Rider Page 4 [(20)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [20] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00 \$780.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DL0 Rider Page 4A [(20)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [10] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [10] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[10]
PLF17DL0	INSURED TERM RIDER [10]	[\$200,000]	[\$392.00]

PLF17DL0 Rider Page 4 [(10)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [10] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00	\$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00 \$392.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$1,626.00 \$1,626.00 \$1,626.00 \$1,626.00 \$1,626.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DL0 Rider Page 4A [(10)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [15] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [15] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[15]
PLF17DL0	INSURED TERM RIDER [15]	[\$200,000]	[\$628.00]

PLF17DL0 Rider Page 4 [(15)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [15] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00	\$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$628.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$628.00 \$628.00 \$628.00 \$628.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$628.00 \$628.00 \$628.00 \$628.00 \$628.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DL0 Rider Page 4A [(15)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [25] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [25] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[25]
PLF17DL0	INSURED TERM RIDER [25]	[\$200,000]	[\$866.00]

PLF17DL0 Rider Page 4 [(25)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [25] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00 \$866.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$866.00 \$866.00 \$866.00 \$866.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$866.00 \$866.00 \$866.00 \$866.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DL0 Rider Page 4A [(25)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [30] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [30] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[30]
PLF17DL0	INSURED TERM RIDER [30]	[\$200,000]	[\$950.00]

PLF17DL0 Rider Page 4 [(30)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [30] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00 \$950.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DL0 Rider Page 4A [(30)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [35] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [35] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[35]
PLF17DL0	INSURED TERM RIDER [35]	[\$200,000]	[\$1,138.00]

PLF17DL0 Rider Page 4 [(35)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [35] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



,

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,122.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$1,138.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17DL0 Rider Page 4A [(35)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



Primerica Life Insurance Company

[1 Primerica Parkway] [Duluth, Georgia 30099–0001]

For Policyowner Service Call [1–800–257–4725] [www.primerica.com]

We will pay the Face Amount, in a lump sum, to the Beneficiary upon receiving due proof that the Insured died before the Expiry Date and while this Policy was in force. This agreement is subject to the provisions on the following pages, which constitute the Policy.

RIGHT TO RETURN POLICY: You may return this Policy to Us or Our authorized agent for any reason within 30 days after You receive it or any longer period as may be required by the applicable law in the state where the policy is issued for delivery. If returned, it will be considered void from the beginning. Any premium paid will be refunded.

This Policy is effective at 12:01 A.M. on the Date of Issue.

Signed on the Date of Issue at Our Executive Offices.

Hacry K. Self [Secretary]

[President 1

TERM LIFE INSURANCE TO AGE 95

PREMIUMS ARE SUBJECT TO CHANGE

EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM OR DECREASING TERM INSURANCE TO AGE 100

NONPARTICIPATING

Primerica Life Insurance Company

(A Stock Company)

PLF17CJ0DC 11.17

TABLE OF CONTENTS

PART 1:	DEFINITIONS	Page	4
PART 2:	GENERAL PROVISIONS	Page	4
PART 3:	BENEFICIARY PROVISIONS	Page	5
PART 4:	PREMIUM PROVISIONS	Page	6
PART 5:	EXCHANGE PROVISIONS	Page	7

POLICY SPECIFICATIONS

0210. 0.201.10...10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [20] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [20] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	ANNUAL PREMIUMS* YEARS 1-[20]
			
PLF17CJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$759.00]

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$759.00]	[\$394.68]	[\$201.14]	[\$72.11]
TOTAL YEARLY COST [FIRST YEAR]		\$759.00]	[\$789.36]	[\$804.56]	[\$865.32]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17CJODC Policy Page 3 [(20)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [20] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00	\$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00	\$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00 \$759.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS

0210. 0.201.10...10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [10] YEARS
SCHEDULED PREMIUMS ARE GUARANTEED FOR [10] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[10]
PLF17CJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$413.00]

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY		MONTHLY
[FIRST YEAR]	[\$413.00]	[\$214.76]	[\$109.45]	Γ	\$39.24]
TOTAL YEARLY COST [FIRST YEAR]		\$413.00]	[\$429.52]	[\$437.80]	[\$470.88]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17CJODC Policy Page 3 [(10)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [10] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00	\$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00 \$413.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,657.00 \$1,657.00 \$1,657.00 \$1,657.00	\$1,701.00 \$1,701.00 \$1,701.00 \$1,701.00 \$1,701.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS

02101 01201110/1110/1

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [15] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [15] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	ANNUAL PREMIUMS* YEARS 1-[15]
PLF17CJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$625.00]

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$625.00]	[\$325.00]	[\$165.63]	[\$59.38]
TOTAL YEARLY COST [FIRST YEAR]		\$625.00]	[\$650.00]	[\$662.52]	[\$712.56]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17CJODC Policy Page 3 [(15)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [15] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00	\$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$625.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$1,657.00 \$1,657.00 \$1,657.00 \$1,657.00	\$625.00 \$625.00 \$625.00 \$625.00 \$625.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00 \$2,971.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$2,643.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$4,893.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS

0210. 0.201.10...10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [25] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [25] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[25]	
PLF17CJODC	TERM LIFE INSURANCE TO AGE 95	[\$200 000]	Г \$845 OOl	

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$845.00]	[\$439.40]	[\$223.93]	[\$80.28]
TOTAL YEARLY COST [FIRST YEAR]	[\$845.00]	Е	\$878.80]	[\$895.72]	[\$963.36]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17CJODC Policy Page 3 [(25)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [25] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00	\$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00	\$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$845.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$4,307.00 \$4,307.00 \$4,307.00 \$4,307.00	\$845.00 \$845.00 \$845.00 \$845.00 \$845.00 \$7,455.00 \$7,455.00 \$7,455.00 \$7,455.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [30] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [30] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[30]	
				
PLF17CJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$929.00]	

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SEM	I-ANNUAL	QUARTERLY	MONTHLY
[FIRST YEAR]	[\$929.00]	[\$483.08]	[\$246.19] [\$88.26]
TOTAL YEARLY COST [FIRST YEAR]	[\$929.00]	[\$966.16]	[\$984.76] [\$1,059.12]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17CJODC Policy Page 3 [(30)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [30] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00	\$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00	\$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00	\$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00 \$929.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$6,935.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$11,031.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

PLF17CJODC Policy Page 3A [(30)] 11.17

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS

0210. 0.201.10...10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

ISSUE AGE: [35] DATE OF ISSUE:[NOVEMBER 01, 2017]

FACE AMOUNT: [\$200,000] POLICY DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [35] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [35] YEARS

FORM NUMBER	PLAN NAME	FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[35]
			
PLF17CJ0DC	TERM LIFE INSURANCE TO AGE 95	[\$200,000]	[\$1,101.00]

TOTAL PREMIUM PAYMENT OPTIONS (includes all riders):

MODE		ANNUAL	SE	MI-ANNUAL	QUARTERLY		MONTHLY
[FIRST YEAR]	[\$1,101.00]	[\$572.52]	[\$291.77]	[\$104.60]
TOTAL YEARLY COST [FIRST YEAR]		\$1,101.00]	[\$1,145.04]	[\$1,167.08]	[\$	1,255.20]

If you would like additional information about the costs of our periodic payments, please contact us at [1-800-257-4725.]

PLF17CJODC Policy Page 3 [(35)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [35] years. All premiums for the premium payment option You chose are shown on Page 3A. Premiums will not change except as described in Part 4, Premium Provisions. Premiums include an annual policy fee of \$75.00.



TABLE A
[ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53 54	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$9,021.00 \$10,287.00 \$11,685.00 \$13,247.00 \$14,999.00	\$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$1,101.00 \$14,281.00 \$15,595.00 \$17,051.00 \$18,625.00 \$20,359.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR BASE POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,983.00 \$19,137.00 \$22,727.00 \$26,837.00 \$31,609.00 \$37,263.00 \$44,039.00 \$51,787.00 \$60,383.00 \$70,483.00	\$22,117.00 \$24,041.00 \$26,121.00 \$28,369.00 \$31,857.00 \$38,535.00 \$44,851.00 \$52,387.00 \$61,115.00 \$71,713.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,299.00 \$96,069.00 \$104,485.00 \$113,515.00 \$123,011.00 \$132,817.00 \$142,925.00 \$153,347.00 \$164,067.00 \$175,095.00	\$83,257.00 \$96,933.00 \$105,863.00 \$115,955.00 \$125,549.00 \$136,595.00 \$148,375.00 \$161,227.00 \$175,785.00 \$193,643.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in Part 4, Premium Provisions.

PART 1 DEFINITIONS

These are some key words used in this Policy.

- 1. ATTAINED AGE The Issue Age plus the number of policy years since the Policy Date.
- 2. BENEFICIARY The person(s) to whom the Policy proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed (see Part 3).
- 3. DATE OF ISSUE The date shown on Page 3 on which We issue the Policy to You. This date controls the Incontestability and Suicide Exclusion provisions in Part 2.
- 4. EXPIRY DATE The date shown on Page 3. The Policy continues until this date. It is not in force on or after this date.
- 5. FACE AMOUNT The amount of insurance for each policy year which is shown in Table A on Page 3A.
- 6. INSURED The person whose life the Policy insures and who is named in the Policy Specifications.
- 7. ISSUE AGE The Insured's age on the birthday nearest the Policy Date.
- 8. NOTICE TO US Communication We have received from You which is acceptable to Us.
- 9. POLICY DATE The date shown on Page 3 from which premium due dates, policy anniversaries, policy years and policy months are measured.
- 10. PREMIUM CLASS The risk classification used in determining what premiums You pay.
- 11. WE, OUR or US Primerica Life Insurance Company.
- 12. YOU or YOUR The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

PART 2 GENERAL PROVISIONS

OWNER OF POLICY – This Policy belongs to You. During the Insured's life, You have all of the rights described in this Policy. You may change the Owner by Notice to Us. Unless otherwise specified the change in owner designation is effective the date the Notice to Us is signed, subject to any payments made or actions taken by Us prior to receipt of the Notice. If You die, Your rights will pass to the named contingent owner, if any. If there is no named contingent owner, Your rights will pass to the Insured.

THE CONTRACT – This Policy is issued in consideration of the application and payment of the first premium. A copy of the application and any supplemental applications (including, but not limited to, interviews and examination reports), is attached and is a part of the Policy. Together, they are the entire contract. All statements in the application, except fraudulent ones, are deemed to be representations and not warranties. No statement will void this Policy or be used in defense of a claim unless: (1) it is contained in a written application; and (2) a copy of that application is attached to this Policy.

DUPLICATE POLICY – You may request a duplicate copy of Your current Policy, that will not contain a copy of the application(s), unless requested by You. A duplicate Policy request should be sent to Us at Our Executive Offices. We will charge a fee for each duplicate Policy request.

WAIVER OR MODIFICATION – Any change to this Policy must be in writing and signed by Our President or Secretary. No agent or any other person can change this Policy or waive any of its provisions on Our behalf.

MISSTATEMENT OF AGE – If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY – We will not contest coverage under this Policy after it has been in force for two years during an Insured's life except for non–payment of premium. The two years begin on the Date of Issue of such coverage. If any person insured under the policy dies within two years from the issue date of any coverage on that person: (1) Primerica Life may contest such coverage under the policy; and (2) such coverage may be rendered void if Primerica Life determines that any information in the application related to such coverage is false, incomplete or incorrect.

SUICIDE EXCLUSION – If the Insured dies by suicide, while sane or insane, within two years of the Date of Issue of any coverage, We are only liable for the premiums paid for such coverage. For reinstated policies, the two year period begins anew.

REPLACED COVERAGE – If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Date of Issue of this Policy, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Date of Issue of this Policy, such 60–day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's policy for \$100,000 and that policy has been in force two years. If this Policy replaced the other company's policy, We would not contest this Policy for up to \$100,000. We would however, be able to contest any amount over \$100,000.

NONPARTICIPATION - This Policy does not participate in Our profits or surplus.

ASSIGNMENT – You may assign Your rights under this Policy. You must give Notice to Us of the assignment. Unless otherwise specified, the assignment is effective on the date the Notice to Us is signed, subject to any payments made or actions taken by Us prior to receipt of the Notice to Us. We are not responsible for the validity of any assignment. The interest of any Beneficiary not designated irrevocable will be subject to the rights of any assignee.

PAYMENT OF PROCEEDS – Due proof of the death of the Insured must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured. Death proceeds equal: (1) the Face Amount of this Policy as shown in Table A on Page 3A; plus (2) any rider benefits; and minus (3) any overdue premium if death occurs during a grace period. Any interest payable on death proceeds will be paid according to applicable state law.

A Beneficiary may choose to receive installments for a fixed period. If chosen, the proceeds will be paid in equal payments for a fixed period. The frequency of the installments and the fixed period will be as selected. The fixed period may not exceed 25 years. The amount of each installment will be determined from the table below. The interest paid under this option is 0.75%. This option will be available only if the amount to be paid to any Beneficiary is at least \$10,000 and is also sufficient to provide a periodic payment of at least \$25.

MONTHLY INSTALLMENTS FOR EACH \$1,000 PAYABLE

Fixed Period in Years	Monthly Amount*								
1	\$83.62	6	\$14.20	11	\$ 7.89	16	\$ 5.52	21	\$ 4.29
2	41.97	7	12.22	12	7.26	17	5.22	22	4.11
3	28.08	8	10.73	13	6.72	18	4.95	23	3.94
4	21.14	9	9.57	14	6.27	19	4.70	24	3.79
5	16.97	10	8.65	15	5.87	20	4.48	25	3.65

^{*} Multiply the monthly installment by 2.998 to obtain the quarterly installment; by 5.991 to obtain the semiannual installment; and by 11.959 to obtain the annual installment.

CANCELLATION – You may cancel Your Policy at any time by Notice to Us. Your Policy will be canceled as of the date We receive the Notice, or, if stated in Your Notice, as of a later date. If this Policy is canceled before the Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the policy month in which cancellation occurred.

PART 3 BENEFICIARY PROVISIONS

BENEFICIARY – The Beneficiary's interest will end if the Beneficiary dies before the Insured. If no primary Beneficiary is living at the Insured's death, the death proceeds will be paid to any contingent Beneficiary living at the Insured's death. The proceeds will be paid to the Owner if the Insured dies and there is no living primary or contingent Beneficiary. Proceeds will be paid to the Insured's estate if there is no living Beneficiary or Owner. We may rely on a sworn statement by any responsible person to discover the identity or nonexistence of any Beneficiary not identified by name.

CHANGE OF BENEFICIARY – You can change a Beneficiary by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocable on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date of the Notice to Us unless otherwise specified by You. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

PART 4 PREMIUM PROVISIONS

PREMIUM PAYMENTS – Premiums are payable to Us in advance. The first premium is due on or before delivery of this Policy and may be paid to Us through one of Our agents. Subsequent premiums must be paid to Us at Our Executive Offices and are due at 12, 6, 3 or 1 Policy month intervals, depending on the premium payment option You chose in the application. The premiums shown on Page 3A are for the premium payment option You chose. Premium amounts for all available payment options are on Page 3. Payment options other than annual result in a higher total annualized premium. You may change the premium payment option for future premium payments upon Notice to Us. Premiums are not due for any period after the Insured's death or the Expiry Date.

If a part of the total premium is no longer payable under the provisions of the Policy or a Rider, the total premium will be adjusted accordingly.

CHANGES IN PREMIUM INITIATED BY YOUR REQUEST – Changes to a benefit amount, Premium Class (e.g. Preferred), or any riders, including adding or deleting riders, requested by You and approved by Us, or riders expiring by their own terms, will change Your scheduled and maximum premiums. Because of higher unit costs at lower insurance coverage amounts, reductions or deletions in policy or rider coverage, including those that result in a change to a Premium Class because minimum insurance amounts for a Premium Class are no longer met, may cause an increase or decrease in premium. Changes to issue age after REINSTATEMENT as described below may also increase Your scheduled and maximum premiums.

PREMIUM CHANGES BY COMPANY – Premiums for this Policy as originally issued will be the scheduled premiums shown on Pages 3 and 3A, unless changed by Us, or You as described above. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the then in effect maximum premiums shown on Page 3A. Any such change will apply uniformly to all policies of this form issued to Insureds having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses, except as may occur in connection with CHANGES IN PREMIUM INITIATED BY YOUR REQUEST, or a REINSTATEMENT which results in changes in insurance age(s).

If We change scheduled premiums, other than as described above in *CHANGES IN PREMIUM INITIATED BY YOUR REQUEST*, We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new policy specifications pages to reflect any changes in scheduled premiums.

GRACE PERIOD – This Policy has a 31 day grace period. This means that, except for the first premium, if a premium is not paid on or before the date it is due, it may be paid during the next 31 days. No interest will be charged for this late payment. During this 31 day period, the Policy will stay in force. If You do not pay the premium by the end of the grace period, this Policy will automatically terminate.

REINSTATEMENT – If this Policy terminates due to unpaid premium, it may be reinstated within three years after the date the first unpaid premium was due, if prior to the Expiry Date.

To reinstate this Policy, We must have evidence of insurability satisfactory to Us for all persons to be covered and payment of all unpaid premiums, plus interest at 6% per year compounded annually. The Policy Date of the reinstated policy will remain the original Policy Date. The reinstated date is the date We approve the reinstatement application.

Another option for reinstating this Policy is by providing evidence of insurability satisfactory to Us for all persons to be covered and payment of one month's premium. The Policy Date of the reinstated policy will be adjusted based on the length of time Your policy was lapsed. Reinstatement in this manner may result in changes in insurance age(s) and premiums may increase. You will be notified by Us if there is a premium increase. The reinstated date is the date We approve the reinstatement application.

The reinstated Policy shall be incontestable to the same extent as indicated in the above Incontestability Provision, from the reinstated date based only on statements in the reinstatement application, unless the original contestable period has not expired. This means that the two year contestable period will begin anew with the reinstatement.

PART 5 EXCHANGE PROVISIONS

EXCHANGE AT ATTAINED AGE – This Policy provides coverage until the Expiry Date, or You may exchange this Policy at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan or the Decreasing Term Insurance to Age 100 Plan described below. If the exchange is for the same class of insurance, we will not require evidence of insurability. The new plan will take effect on the exchange date and this Policy will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by the Date of Issue of this Policy. We will issue either revised policy specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Policy is in force on the exchange date; and (6) premiums for Your current Policy are not being waived under any rider attached to this Policy. The exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date.

ANNUAL INCREASING PREMIUM TERM INSURANCE TO AGE 100 PLAN – For this plan, the face amount remains level while premiums increase each year with Attained Age. Annual premiums per \$1,000 face amount for this plan are shown below in Table B. We reserve the right to change the scheduled premiums shown in Table B. We will not change the premiums to more than the maximum premiums shown in Table B.

TABLE B PREFERRED PLUS/PREFERRED ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.

		SCHE	DULED		MAXIMUM			SCHEE	ULED		MAXIMUM
	\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE	405	\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE
AGE		\$249,999	\$499,999	and over	AMOUNTS			\$249,999	\$499,999	and over	AMOUNTS
20 21	\$ 1.13 1.13	\$ 0.79 0.79	\$ 0.71 0.71	\$ 0.63 0.63	\$ 1.28 1.28	60 61	\$ 11.55 12.75	\$ 6.00 6.64	\$ 5.57 6.15	\$ 5.35 5.91	\$ 12.45 13.51
22	1.13	0.79	0.71	0.63	1.28	62	14.09	7.33	6.79	6.52	14.67
23	1.13	0.79	0.71	0.63	1.28	63	15.49	8.05	7.47	7.18	15.87
24	1.13 1.13	0.79	0.71	0.63	1.28	64	17.01	8.84	8.19	7.88	17.16
25 26	1.13 1.13	0.79 0.79	0.71 0.71	0.63 0.63	1.28 1.28	65 66	18.51 19.96	9.71 10.62	9.00 9.84	8.65 9.46	18.59 20.18
27	1.13	0.79	0.71	0.63	1.28	67	21.53	11.59	10.75 11.76	10.33	21.91
28	1.13	0.79	0.71	0.63	1.28	68	23.30	12.69	11.76	11.31	23.84
29	1.13	0.79	0.71	0.63	1.28	69 70	25.89	13.54	12.55	12.06	25.96
30 31	1.13 1.13	0.79 0.79	0.71 0.71	0.63 0.63	1.28 1.28	70	27.97 30.55	14.90 16.74	13.81 15.43	13.27 14.74	28.30 31.00
32	1.13	0.79	0.71	0.63	1.28	72	33.55	18.77	17.20	16.35	34.01
33 34	1.13 1.19	0.79 0.82	0.71 0.74	0.63 0.65	1.28 1.38	73 74	36.13 38.99	21.01 23.50	19.15 21.32	18.16 20.15	37.27 40.86
35	1.19	0.86	0.74	0.69	1.50	75	42.14	26.31	23.74	22.38	44.83
36	1.34	0.90	0.80	0.09	1.60	76	45.53	29.46	26.46	24.88	49.19
37	1.45	0.95	0.86	0.77	1.73	77	49.24	32.99	29.49	27.66	53.98
38 39	1.51 1.63	0.99 1.06	0.90 0.95	0.80 0.86	1.80 1.90	78 79	53.36 57.73	36.92 41.29	32.86 36.58	30.75 34.16	59.28 65.00
40	1.77	1.12	1.01	0.93	2.02	80	62.77	46.08	40.66	37.89	71.40
41	1.91 2.07	1.20 1.26	1.08 1.15	0.99	2.14	81	70.91	51.32	45.10 49.88	41.91	80.08
42 43	2.07	1.26	1.15	1.06	2.27 2.44	82 83	80.38	56.97 63.10	49.88	46.25	89.87
43	2.26 2.45	1.35 1.45	1.23 1.32	1.14 1.22	2.44	84	89.34 98.35	69.92	55.02 60.75	50.93 56.14	99.63 110.42
45	2.67	1.56	1.42	1.32	2.88	85	109.18	77.48	67.08	61.33	122.57
46	2.92	1.66	1.52	1.43	3.15	86	121.82	85.81	74.04	67.00	133.59
47 48	3.18 3.48	1.78 1.89	1.63 1.75	1.54 1.65	3.48 3.85	87 88	136.81 152.77	94.94 104.89	81.64 89.90	73.13 79.72	150.18 167.51
49	3.77	2.01	1.86	1.77	4.26	89	168.99	115.56	98.74	86.99	185.99
50	4.10	2.14	1.98	1.90	4.73	90	186.55	124.78	106.62	94.58	203.02
51 52	4.54 5.03	2.36 2.61	2.19 2.42	2.10 2.33	5.25 5.84	91 92	204.78 224.31	134.28 144.09	114.74 123.11	102.13 109.96	211.63 228.58
53	5.03 5.56	2.89	2.42 2.69	2.33 2.58	5.84 6.48	92	244.82	154.16	123.11	118.04	253.72
54	6.13	3.19	2.95	2.84	7.15	94	266.42	164.53	140.58	126.40	285.45
55	6.78	3.53	3.26	3.14	7.88	95	291.16	175.19	149.69	134.59	324.63
56 57	7.56 8.43	3.93 4.38	3.65 4.06	3.51 3.90	8.72 9.59	96 97	318.25 381.82	189.53 317.05	161.95 270.91	145.61 243.58	361.83 400.13
58	9.41	4.90	4.53	4.35	10.53	98	404.11	335.57	286.73	257.81	406.69
59	10.45	5.43	5.04	4.84	11.48	99	426.92	354.52	302.91	272.37	428.65
1				NIC	TE. ACE IS	۸ ۸ ۱	NED ACE				

TABLE B (CONT'D)

NON-TOBACCO, NON-NICOTINE ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.

		SCHE	DULED		MAXIMUM			SCHEE	DULED		MAXIMUM
	\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE		\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE
AGE		\$249,999	\$499,999	and over		AGE	and below	\$249,999	\$499,999	and over	AMOUNTS
20 21	\$ 1.13 1.13	\$ 1.10 1.10	\$ 0.99 0.99	\$ 0.90 0.90	\$ 1.64 1.64	60 61	\$ 11.55 12.75	\$ 10.43 11.52	\$ 9.68 10.69	\$ 9.24 10.20	\$ 16.01 17.37
22	1.13	1.10	0.99	0.90	1.64	62	14.09	12.73	11.81	11.27	18.87
23	1.13	1.10	0.99	0.90	1.64	63	15.49	13.99	12.99	12.39	20.40
24	1.13	1.10	0.99	0.90	1.64	64	17.01	15.36	14.27	13.60	22.07
25 26	1.13 1.13	1.10 1.10	0.99 0.99	0.90 0.90	1.64 1.64	65 66	18.67 20.40	16.87 18.43	15.67 17.11	14.94 16.33	23.91 25.94
27	1.13	1.10	0.99	0.90	1.64	67	20.40	20.29	17.11	17.85	28.17
28	1.13	1.10	0.99	0.90	1.64	68	24.41	22.36	20.48	19.53	30.66
29	1.13	1.10	0.99	0.90	1.64	69	26.03	24.02	21.83	20.82	33.38
30	1.13	1.10	0.99	0.90	1.64	70	28.64	26.61	24.03	22.91	36.39
31 32	1.13 1.13	1.10 1.10	0.99 0.99	0.90 0.90	1.64 1.64	71 72	31.46 34.48	29.45 32.49	26.51 29.18	25.24 27.73	39.86 43.73
33	1.13	1.10	0.99	0.90	1.64	73	38.48	35.82	32.10	30.44	47.92
34	1.19	1.16	1.04	0.95	1.77	74	42.92	39.50	35.31	33.42	52.53
35	1.26	1.22	1.09	1.00	1.93	75	47.89	43.57	38.89	36.74	57.64
36 37	1.34 1.45	1.29 1.39	1.17 1.26	1.07 1.15	2.06 2.23	76 77	53.49 59.73	48.12 53.15	42.86 47.28	40.42 44.51	63.24 69.40
38	1.51	1.45	1.31	1.13	2.23	78	66.68	58.71	52.16	49.02	76.22
39	1.63	1.56	1.42	1.30	2.44	79	74.36	64.79	57.52	53.94	83.57
40	1.77	1.69	1.54	1.42	2.60	80	82.78	71.41	63.35	59.32	91.80
41 42	1.91 2.07	1.81 1.95	1.65 1.78	1.53 1.66	2.75 2.92	81 82	91.98 101.90	78.57 86.21	69.69 76.33	65.14 71.37	102.96 115.55
43	2.26	2.11	1.78	1.80	3.14	83	112.60	94.37	83.45	71.37 78.04	128.10
44	2.45	2.29	2.09	1.96	3.40	84	124.55	103.42	91.37	85.47	141.97
45	2.67	2.48	2.28	2.14	3.70	85	137.75	113.36	100.11	93.68	157.59
46 47	2.92 3.18	2.70 2.92	2.48 2.70	2.34 2.55	4.05 4.48	86 87	152.25 168.13	124.20 135.98	109.67 120.14	102.67 112.53	171.76 193.09
48	3.48	2.92 3.17	2.70 2.93	2.55 2.78	4.46	88	185.40	148.70	131.52	123.23	215.37
49	3.77	3.42	3.16	3.01	5.47	89	200.93	162.19	143.68	134.72	239.13
50	4.10	3.71	3.44	3.29	6.08	90	216.96	176.25	156.48	146.80	261.03
51	4.54	4.09	3.80	3.63	6.75	91	233.48	189.73	169.95	159.55	272.10
52 53	5.03 5.56	4.54 5.03	4.22 4.67	4.02 4.45	7.51 8.33	92 93	250.52 268.04	203.64 217.95	184.12 199.06	172.99 187.16	293.89 326.21
54	6.13	5.54	5.13	4.90	9.19	94	286.05	232.67	214.78	202.11	367.01
55	6.78	6.12	5.69	5.42	10.13	95	304.58	247.74	228.70	215.21	417.38
56 57	7.56 8.43	6.83	6.35 7.07	6.05 6.74	11.21 12.33	96 97	324.95 389.85	264.31 317.11	243.98 292.73	229.59 275.46	465.21
58	8.43 9.41	7.61 8.50	7.07 7.90	6.74 7.52	12.33	97 98	389.85 412.62	317.11 335.61	309.81	275.46 291.53	514.45 522.89
59	10.45	9.43	8.76	8.35	14.75	99	435.91	354.57	327.30	307.99	551.12
				NC	OTE AGE IS	ΔΤΤΔΙ	NED AGE				

TABLE B (CONT'D)

TOBACCO, NICOTINE

ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.

		SCHE	DULED		MAXIMUM			SCHEE	DULED		MAXIMUM
AGE	\$149,999 and below	\$150,000 - \$249.999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE	AGE	\$149,999 and below	\$150,000 - \$249.999	\$250,000 - \$499.999	\$500,000 and over	ALL FACE AMOUNTS
20 21 22 23 24	\$ 1.83 1.83 1.83 1.83 1.83	\$ 1.80 1.80 1.80 1.80 1.80	\$ 1.56 1.56 1.56 1.56 1.56	\$ 1.50 1.50 1.50 1.50 1.50	\$ 2.53 2.53 2.53 2.53 2.53 2.53	60 61 62 63 64	\$19.39 21.42 23.72 26.12 28.71	\$18.21 20.11 22.27 24.53 26.96	\$17.02 18.80 20.81 22.93 25.20	\$16.61 18.36 20.34 22.39 24.61	\$31.75 34.44 37.47 40.53 43.78
25	1.83	1.80	1.56	1.50	2.53	65	31.57	29.64	27.71	27.06	47.34
26	1.83	1.80	1.56	1.50	2.53	66	34.31	32.21	30.12	29.41	51.14
27	1.83	1.80	1.56	1.50	2.53	67	37.39	35.10	32.81	32.05	55.42
28	1.83	1.80	1.56	1.50	2.53	68	40.77	38.28	35.78	34.95	60.14
29	1.83	1.80	1.56	1.50	2.53	69	43.30	40.65	38.00	37.12	65.28
30	1.83	1.80	1.56	1.50	2.53	70	47.64	44.73	41.81	40.84	71.03
31	1.83	1.80	1.56	1.50	2.53	71	55.84	51.06	46.58	45.40	77.60
32	1.83	1.80	1.56	1.50	2.53	72	62.06	58.05	51.73	50.33	84.88
33	1.83	1.80	1.56	1.50	2.53	73	69.59	65.86	57.40	55.74	92.75
34	1.90	1.86	1.63	1.56	2.76	74	78.39	74.62	63.68	61.72	101.42
35	2.03	1.99	1.74	1.68	3.06	75	88.17	84.54	70.71	68.40	110.21
36	2.16	2.11	1.85	1.77	3.32	76	98.65	95.31	78.54	75.84	119.83
37	2.34	2.28	2.01	1.94	3.62	77	109.60	105.60	87.28	84.14	130.23
38	2.48	2.41	2.12	2.05	3.82	78	121.09	116.33	96.95	93.30	141.47
39	2.66	2.59	2.29	2.22	4.09	79	133.44	127.80	107.61	103.38	153.68
40	2.87	2.76	2.47	2.39	4.35	80	147.18	140.53	119.26	114.39	166.89
41	3.10	2.99	2.69	2.59	4.67	81	162.73	154.91	131.94	126.35	185.34
42	3.38	3.25	2.92	2.82	5.04	82	180.55	169.89	145.54	139.16	205.47
43	3.69	3.54	3.20	3.10	5.49	83	200.07	184.74	160.15	152.90	225.27
44	4.01	3.84	3.49	3.38	6.00	84	222.99	201.10	176.39	168.15	246.65
45	4.37	4.16	3.79	3.69	6.60	85	245.89	218.97	194.30	184.97	268.36
46	4.71	4.48	4.11	3.99	7.27	86	271.91	238.36	213.95	203.38	286.80
47	5.13	4.87	4.47	4.35	8.12	87	296.98	259.26	235.36	223.42	315.55
48	5.63	5.32	4.92	4.80	9.17	88	325.31	281.68	258.60	245.15	344.48
49	6.18	5.83	5.41	5.28	10.35	89	352.24	305.26	283.39	268.28	373.81
50	6.79	6.37	5.95	5.81	11.66	90	383.25	329.61	309.36	292.49	398.01
51	7.53	7.07	6.61	6.45	13.09	91	416.32	354.71	336.56	317.79	416.42
52	8.35	7.84	7.33	7.16	14.66	92	452.40	380.59	365.00	344.21	452.50
53	9.26	8.69	8.12	7.93	16.34	93	493.27	407.21	394.71	371.77	493.37
54	10.30	9.67	9.04	8.82	18.19	94	543.40	434.59	425.69	400.47	543.50
55	11.44	10.73	10.04	9.80	20.14	95	566.60	462.73	453.26	426.40	568.43
56	12.74	11.96	11.18	10.92	22.25	96	594.61	492.93	482.84	454.23	626.44
57	14.22	13.35	12.47	12.19	24.51	97	655.20	566.74	555.14	522.24	684.72
58	15.75	14.78	13.82	13.50	26.72	98	738.53	599.81	587.52	552.72	739.53
59	17.50	16.42	15.36	15.00	29.18	99	780.25	633.69	620.72	583.94	781.25

DECREASING TERM INSURANCE TO AGE 100 PLAN - For this plan, the face amount decreases while premiums remain level. The face amount decreases each year with Attained Age, as shown in Table C below. We reserve the right to change the scheduled face amount, but not lower than the minimum face amount as determined from Table C.

TABLE C PREFERRED PLUS/PREFERRED **FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS** THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN MINUS THE ANNUAL POLICY FEE OF \$75

		SCHE	DULED		MINIMUM			SCHEE	OULED		MINIMUM
	\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE		\$149,999	\$150,000 -	\$250,000 -	\$500,000	ALL FACE
AGE	and below	\$249,999	\$499,999	and over		AGE	and below	\$249,999	\$499,999	and over	AMOUNTS
20	\$88,495	\$126,582	\$140,845	\$158,730	\$78,125	60	\$8,658	\$16,666	\$17,953	\$18,691	\$8,032
21	88,495	126,582	140,845	158,730	78,125	61	7,843	15,060	16,260	16,920	7,401
22	88,495	126,582	140,845	158,730	78,125	62	7,097	13,642	14,727	15,337	6,816
23	88,495	126,582	140,845	158,730	78,125	63	6,455	12,422	13,386	13,927	6,301
24	88,495	126,582	140,845	158,730	78,125	64	5,878	11,312	12,210	12,690	5,827
25	88,495	126,582	140,845	158,730	78,125	65	5,402	10,298	11,111	11,560	5,379
26	88,495	126,582	140,845	158,730	78,125	66	5,010	9,416	10,162	10,570	4,955
27	88,495	126,582	140,845	158,730	78,125	67	4,644	8,628	9,302	9,680	4,564
28	88,495	126,582	140,845	158,730	78,125	68	4,291	7,880	8,503	8,841	4,194
29	88,495	126,582	140,845	158,730	78,125	69	3,862	7,385	7,968	8,291	3,852
30	88,495	126,582	140,845	158,730	78,125	70	3,575	6,711	7,241	7,535	3,533
31	88,495	126,582	140,845	158,730	78,125	71	3,273	5,973	6,480	6,784	3,225
32	88,495	126,582	140,845	158,730	78,125	72	2,980	5,327	5,813	6,116	2,940
33	88,495	126,582	140,845	158,730	78,125	73	2,767	4,759	5,221	5,506	2,683
34	84,033	121,951	135,135	153,846	72,463	74	2,564	4,255	4,690	4,962	2,447
35	79,365	116,279	129,870	144,927	66,666	75	2,373	3,800	4,212	4,468	2,230
36	74,626	111,111	125,000	138,888	62,500	76	2,196	3,394	3,779	4,019	2,032
37	68,965	105,263	116,279	129,870	57,803	77	2,030	3,031	3,390	3,615	1,852
38	66,225	101,010	111,111	125,000	55,555	78	1,874	2,708	3,043	3,252	1,686
39	61,349	94,339	105,263	116,279	52,631	79	1,732	2,421	2,733	2,927	1,538
40	56,497	89,285	99,009	107,526	49,504	80	1,593	2,170	2,459	2,639	1,400
41	52,356	83,333	92,592	101,010	46,728	81	1,410	1,948	2,217	2,386	1,248
42	48,309	79,365	86,956	94,339	44,052	82	1,244	1,755	2,004	2,162	1,112
43	44,247	74,074	81,300	87,719	40,983	83	1,119	1,584	1,817	1,963	1,003
44	40,816	68,965	75,757	81,967	37,878	84	1,016	1,430	1,646	1,781	905
45	37,453	64,102	70,422	75,757	34,722	85	915	1,290	1,490	1,630	815
46	34,246	60,240	65,789	69,930	31,746	86	820	1,165	1,350	1,492	748
47	31,446	56,179	61,349	64,935	28,735	87	730	1,053	1,224	1,367	665
48	28,735	52,910	57,142	60,606	25,974	88	654	953	1,112	1,254	596
49	26,525	49,751	53,763	56,497	23,474	89	591	865	1,012	1,149	537
50	24,390	46,728	50,505	52,631	21,141	90	536	801	937	1,057	492
51	22,026	42,372	45,662	47,619	19,047	91	488	744	871	979	472
52	19,880	38,314	41,322	42,918	17,123	92	445	694	812	909	437
53	17,985	34,602	37,174	38,759	15,432	93	408	648	759	847	394
54	16,313	31,347	33,898	35,211	13,986	94	375	607	711	791	350
55	14,749	28,328	30,674	31,847	12,690	95	343	570	668	742	308
56	13,227	25,445	27,397	28,490	11,467	96	314	527	617	686	276
57	11,862	22,831	24,630	25,641	10,427	97	261	315	369	410	249
58	10,626	20,408	22,075	22,988	9,496	98	247	298	348	387	245
59	9,569	18,416	19,841	20,661	8,710	99	234	282	330	367	233
				NC	DTE: AGE IS	ΔΤΤΔ	NED AGE				

TABLE C (CONT'D)

NON-TOBACCO, NON-NICOTINE FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN MINUS THE ANNUAL POLICY FEE OF \$75

		SCHE	DULED		MINIMUM			SCHEE	ULED		MINIMUM
AGE	\$149,999 and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE AMOUNTS	AGE	\$149,999 and below	\$150,000 - \$249,999	\$250,000 - \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$88,495	\$90,909	\$101,010	\$111,111	\$60,975	60	\$8,658	\$9,587	\$10,330	\$10,822	\$6,246
21	88,495	90,909	101,010	111,111	60,975	61	7,843	8,680	9,354	9,803	5,757
22	88,495	90,909	101,010	111,111	60,975	62	7,097	7,855	8,467	8,873	5,299
23	88,495	90,909	101,010	111,111	60,975	63	6,455	7,147	7,698	8,071	4,901
24	88,495	90,909	101,010	111,111	60,975	64	5,878	6,510	7,007	7,352	4,531
25	88,495	90,909	101,010	111,111	60,975	65	5,356	5,927	6,381	6,693	4,182
26	88,495	90,909	101,010	111,111	60,975	66	4,901	5,425	5,844	6,123	3,855
27	88,495	90,909	101,010	111,111	60,975	67	4,484	4,928	5,344	5,602	3,549
28	88,495	90,909	101,010	111,111	60,975	68	4,096	4,472	4,882	5,120	3,261
29	88,495	90,909	101,010	111,111	60,975	69	3,841	4,163	4,580	4,803	2,995
30	88,495	90,909	101,010	111,111	60,975	70	3,491	3,757	4,161	4,364	2,748
31	88,495	90,909	101,010	111,111	60,975	71	3,178	3,395	3,772	3,961	2,508
32	88,495	90,909	101,010	111,111	60,975	72	2,900	3,077	3,427	3,606	2,286
33	88,495	90,909	101,010	111,111	60,975	73	2,598	2,791	3,115	3,285	2,086
34	84,033	86,206	96,153	105,263	56,497	74	2,329	2,531	2,832	2,992	1,903
35	79,365	81,967	91,743	100,000	51,813	75	2,088	2,295	2,571	2,721	1,734
36	74,626	77,519	85,470	93,457	48,543	76	1,869	2,078	2,333	2,474	1,581
37	68,965	71,942	79,365	86,956	44,843	77	1,674	1,881	2,115	2,246	1,440
38	66,225	68,965	76,335	82,644	43,290	78	1,499	1,703	1,917	2,039	1,311
39	61,349	64,102	70,422	76,923	40,983	79	1,344	1,543	1,738	1,853	1,196
40	56,497	59,171	64,935	70,422	38,461	80	1,208	1,400	1,578	1,685	1,089
41	52,356	55,248	60,606	65,359	36,363	81	1,087	1,272	1,434	1,535	971
42	48,309	51,282	56,179	60,240	34,246	82	981	1,159	1,310	1,401	865
43	44,247	47,393	51,813	55,555	31,847	83	888	1,059	1,198	1,281	780
44	40,816	43,668	47,846	51,020	29,411	84	802	966	1,094	1,170	704
45	37,453	40,322	43,859	46,728	27,027	85	725	882	998	1,067	634
46	34,246	37,037	40,322	42,735	24,691	86	656	805	911	973	582
47	31,446	34,246	37,037	39,215	22,321	87	594	735	832	888	517
48	28,735	31,545	34,129	35,971	20,202	88	539	672	760	811	464
49	26,525	29,239	31,645	33,222	18,281	89	497	616	695	742	418
50	24,390	26,954	29,069	30,395	16,447	90	460	567	639	681	383
51	22,026	24,449	26,315	27,548	14,814	91	428	527	588	626	367
52	19,880	22,026	23,696	24,875	13,315	92	399	491	543	578	340
53	17,985	19,880	21,413	22,471	12,004	93	373	458	502	534	306
54	16,313	18,050	19,493	20,408	10,881	94	349	429	465	494	272
55	14,749	16,339	17,574	18,450	9,871	95	328	403	437	464	239
56	13,227	14,641	15,748	16,528	8,920	96	307	378	409	435	214
57	11,862	13,140	14,144	14,836	8,110	97	256	315	341	363	194
58	10,626	11,764	12,658	13,297	7,385	98	242	297	322	343	191
59	9,569	10,604	11,415	11,976	6,779	99	229	282	305	324	181
56 57 58	13,227 11,862 10,626	14,641 13,140 11,764	15,748 14,144 12,658	16,528 14,836 13,297 11,976	8,920 8,110 7,385	96 97 98 99	307 256 242 229	378 315 297	409 341 322	435 363 343	_

TABLE C (CONT'D)

TOBACCO, NICOTINE

FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN MINUS THE ANNUAL POLICY FEE OF \$75

		SCHE	DULED		MINIMUM			SCHEE	ULED		MINIMUM
AGE	\$149,999	\$150,000 - \$249,999	\$250,000 - \$499.999	\$500,000	ALL FACE AMOUNTS	AGE	\$149,999	\$150,000 - \$249.999	\$250,000 - \$499.999	\$500,000	ALL FACE AMOUNTS
20 21 22 23 24	\$54,644 54,644 54,644 54,644 54,644	\$55,555 55,555 55,555 55,555 55,555 55,555	\$64,102 64,102 64,102 64,102 64,102	\$66,666 66,666 66,666 66,666 66,666	\$39,525 39,525 39,525 39,525 39,525 39,525	60 61 62 63 64	\$5,157 4,668 4,215 3,828 3,483	\$5,491 4,972 4,490 4,076 3,709	\$5,875 5,319 4,805 4,361 3,968	\$6,020 5,446 4,916 4,466 4,063	\$3,149 2,903 2,668 2,467 2,284
25 26 27 28 29	54,644 54,644 54,644 54,644 54,644	55,555 55,555 55,555 55,555 55,555	64,102 64,102 64,102 64,102 64,102	66,666 66,666 66,666 66,666	39,525 39,525 39,525 39,525 39,525	65 66 67 68 69	3,167 2,914 2,674 2,452 2,309	3,373 3,104 2,849 2,612 2,460	3,608 3,320 3,047 2,794 2,631	3,695 3,400 3,120 2,861 2,693	2,112 1,955 1,804 1,662 1,531
30	54,644	55,555	64,102	66,666	39,525	70	2,099	2,235	2,391	2,448	1,407
31	54,644	55,555	64,102	66,666	39,525	71	1,790	1,958	2,146	2,202	1,288
32	54,644	55,555	64,102	66,666	39,525	72	1,611	1,722	1,933	1,986	1,178
33	54,644	55,555	64,102	66,666	39,525	73	1,436	1,518	1,742	1,794	1,078
34	52,631	53,763	61,349	64,102	36,231	74	1,275	1,340	1,570	1,620	985
35	49,261	50,251	57,471	59,523	32,679	75	1,134	1,182	1,414	1,461	907
36	46,296	47,393	54,054	56,497	30,120	76	1,013	1,049	1,273	1,318	834
37	42,735	43,859	49,751	51,546	27,624	77	912	946	1,145	1,188	767
38	40,322	41,493	47,169	48,780	26,178	78	825	859	1,031	1,071	706
39	37,593	38,610	43,668	45,045	24,449	79	749	782	929	967	650
40	34,843	36,231	40,485	41,841	22,988	80	679	711	838	874	599
41	32,258	33,444	37,174	38,610	21,413	81	614	645	757	791	539
42	29,585	30,769	34,246	35,460	19,841	82	553	588	687	718	486
43	27,100	28,248	31,250	32,258	18,214	83	499	541	624	654	443
44	24,937	26,041	28,653	29,585	16,666	84	448	497	566	594	405
45	22,883	24,038	26,385	27,100	15,151	85	406	456	514	540	372
46	21,231	22,321	24,330	25,062	13,755	86	367	419	467	491	348
47	19,493	20,533	22,371	22,988	12,315	87	336	385	424	447	316
48	17,761	18,796	20,325	20,833	10,905	88	307	355	386	407	290
49	16,181	17,152	18,484	18,939	9,661	89	283	327	352	372	267
50	14,727	15,698	16,806	17,211	8,576	90	260	303	323	341	251
51	13,280	14,144	15,128	15,503	7,639	91	240	281	297	314	240
52	11,976	12,755	13,642	13,966	6,821	92	221	262	273	290	220
53	10,799	11,507	12,315	12,610	6,119	93	202	245	253	268	202
54	9,708	10,341	11,061	11,337	5,497	94	184	230	234	249	183
55	8,741	9,319	9,960	10,204	4,965	95	176	216	220	234	175
56	7,849	8,361	8,944	9,157	4,494	96	168	202	207	220	159
57	7,032	7,490	8,019	8,203	4,079	97	152	176	180	191	146
58	6,349	6,765	7,235	7,407	3,742	98	135	166	170	180	135
59	5,714	6,090	6,510	6,666	3,427	99	128	157	161	171	128
				NO	OTE: AGE IS	ATTA	NED AGE.				

NOTE. AGE IS ATTAINED AGE

RIDERS – The continuation in the new plan of any benefits provided by Rider(s) attached to this Policy which are not exchanged will be subject to the provision for continuation, if any, in each Rider. The premium for any Rider continued after exchange will be added to the premium for the new plan.

RIDER EXCHANGE AT DEATH OF INSURED – If any Insured Spouse Riders attached to this Policy are in force upon the Insured's death, they may be exchanged for a new policy to be owned by the Insured Spouse in accordance with the Exchange provision in each rider except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive Notice to Us for the exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death, We will pay to the Beneficiary of the Rider the insurance in force under the Rider at the Insured's death, less any overdue premium for the Rider.



TERM LIFE INSURANCE TO AGE 95

PREMIUMS ARE SUBJECT TO CHANGE

EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM OR DECREASING TERM INSURANCE TO AGE 100

NONPARTICIPATING

PLF17CJ0DC 11.17

PRIMERICA LIFE INSURANCE COMPANY

Executive Offices: [1 Primerica Parkway, Duluth, Georgia 30099-0001]

SPOUSE TERM INSURANCE RIDER

PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of Your Policy. This Rider is subject to the provisions of the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control. This Rider does not have cash values or loan values.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured Spouse died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY – The person(s) to whom the rider proceeds are payable upon the death of the Insured Spouse. Unless otherwise stated in the application or by Notice to Us (See Change of Beneficiary Provision, below), the Beneficiary of this Rider will be the Insured, if living; otherwise the estate of the Insured Spouse.

INSURED - The person whose life the Policy insures and who is named in the Policy Specifications.

INSURED SPOUSE – The person whose life this Rider insures. This person is the spouse of the Insured and is named in the Rider Specifications.

NOTICE TO US - Communication We have received from You which is acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE – The Insured Spouse's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE – The date shown on Rider Page 4 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE – The date shown on Rider Page 4 on which We issue the Rider to You. This date controls the below Incontestability and Suicide Exclusion provisions.

RIDER EXPIRY DATE - The date shown on Rider Page 4. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 4A.

RIDER ISSUE AGE - The Insured Spouse's age on the birthday nearest the Rider Date.

GENERAL PROVISIONS

CONSIDERATION – This Rider is issued in consideration of: (1) the application for this Rider and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS – Premiums for this Rider are payable in addition to the premiums for the Policy. The premiums shown on Rider Page 4A are for the premium payment option You chose. Total premium amounts for all available payment options are on Policy Page 3. Payment options other than annual result in a higher total annualized premium. You may change the premium payment option for future premium payments upon Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. Premiums for this Rider are not due for any period after the Insured Spouse's death, the Rider Expiry Date or when this Rider terminates.

PLF17CK0 11.17

CHANGES IN PREMIUM INITIATED BY YOUR REQUEST – Changes to a benefit amount, Premium Class (e.g. Preferred), or any riders, including adding or deleting riders, requested by You and approved by Us, or riders expiring by their own terms, will change Your scheduled and maximum premiums. Because of higher unit costs at lower insurance coverage amounts, reductions or deletions in policy or rider coverage, including those that result in a change to a Premium Class because minimum insurance amounts for a Premium Class are no longer met, may cause an increase or decrease in premium. Changes to issue age after REINSTATEMENT as described below may also increase Your scheduled and maximum premiums.

PREMIUM CHANGES BY COMPANY – Premiums for this Rider as originally issued will be the scheduled premiums shown on Rider Pages 4 and 4A, unless changed by Us, or You as described above. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the then in effect maximum premiums shown on Rider Page 4A. Any such change will apply uniformly to all riders of this form issued to Insured Spouses having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses, except as may occur in connection with CHANGES IN PREMIUM INITIATED BY YOUR REQUEST, or a REINSTATEMENT which results in changes in insurance age(s).

If We change scheduled premiums, other than as described above in *CHANGES IN PREMIUM INITIATED BY YOUR REQUEST*, We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

INCONTESTABILITY – We will not contest coverage under this Rider after it has been in force for two years during an Insured Spouse's life except for non–payment of premium. The two years begin on the Rider Date of Issue of such coverage. If any person insured under the Rider dies within two years from the issue date of any coverage on that person: (1) Primerica Life may contest such coverage under the Rider; and (2) such coverage may be rendered void if Primerica Life determines that any information in the application related to such coverage is false, incomplete or incorrect.

SUICIDE EXCLUSION – If the Insured Spouse dies by suicide, while sane or insane, within two years of the Date of Issue of any coverage, We are only liable for the premiums paid for such coverage. For reinstated riders, the two year period begins anew.

REPLACED COVERAGE – If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured Spouse's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60–day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, the Insured Spouse is insured under another company's policy for \$100,000 and that policy has been in force two years. If this Rider replaced the other company's policy, We would not contest this Rider for up to \$100,000. We would, however, be able to contest any amount over \$100,000.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

CHANGE OF BENEFICIARY – You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured Spouse is alive. A Beneficiary designated irrevocable on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date of the Notice to Us, unless otherwise specified by You. If the Insured Spouse dies before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION – This Rider terminates and is no longer in force: (1) upon cancellation; (2) upon termination of the policy; (3) upon the death of the Insured (subject to Exchange at Death of Insured Provision); (4) upon nonpayment of premiums, in accordance with the provisions of the policy; (5) upon exchange of this Rider; or (6) on the Rider Expiry Date.

REINSTATEMENT – If termination occurs due to unpaid premium, this Rider may be reinstated subject to the provisions of the Policy.

CANCELLATION – You may cancel this Rider at any time by Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION – You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan or the Decreasing Term Insurance to Age 100 Plan described in the Policy. The new plan will be issued at Our premium rates for that plan for the Insured Spouse's Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 4. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised rider specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured Spouse is alive; (5) this Rider is in force on the exchange date; and (6) premiums for Your current Rider are not being waived.

OPTIONS AT DEATH OF INSURED – Upon the death of the Primary Insured, premiums actually paid for this Rider beyond the policy month in which death occurred will be paid to the Primary Insured's beneficiary(ies). Additionally, if this Rider is in force at the Insured's death, the Insured Spouse may exchange this Rider for a new policy in accordance with the above Exchange Provision or for a new policy of the same plan type and duration, with the same issue age, premium class, and face amount as this Rider. If a new policy of the same plan type is obtained and a Spouse Waiver of Premium Rider is in force at the Insured's death, the new policy of the same plan type will include, unless otherwise directed by the Insured Spouse, a Waiver of Premium Rider with the same issue age and premium class as the Spouse Waiver of Premium Rider. If the Insured was also the Owner, then the Insured Spouse will own the new policy, notwithstanding any Contingent Owner. The exchange must be made within 60 days after the Insured's death. The issue date of the new policy will be the day We receive Notice to Us for the exchange. However, the plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. If the Insured Spouse dies before exchange takes effect and within 60 days after the Insured's death, We will pay to the Beneficiary of this Rider the insurance in force under this Rider at the Insured's death, less any premium due.

EXCHANGE AT POLICY EXPIRY – If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the issue date of the policy will be the day We receive Notice to Us for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.

Stacy & Slen [Secretary]

President 1

Vaid (fradwick



RIDER SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [20] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [20] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[20]
PLF17CK0	SPOUSE TERM RIDER [20]	[\$200,000]	[\$684.00]

PLF17CKO Rider Page 4 [(20)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [20] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



......,

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43 44	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73 74	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CKO Rider Page 4A [(20)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [10] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [10] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[10]
			
PLF17CK0	SPOUSE TERM RIDER [10]	[\$200,000]	[\$338.00]

PLF17CKO Rider Page 4 [(10)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [10] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00	\$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$1,626.00 \$1,626.00 \$1,626.00 \$1,626.00 \$1,626.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CKO Rider Page 4A [(10)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [15] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [15] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[15]
PLF17CK0	SPOUSE TERM RIDER [15]	[\$200,000]	[\$550.00]

PLF17CKO Rider Page 4 [(15)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [15] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



......

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43 44	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CKO Rider Page 4A [(15)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [25] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [25] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[25]
PLF17CK0	SPOUSE TERM RIDER [25]	[\$200,000]	[\$770.00]

PLF17CKO Rider Page 4 [(25)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [25] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A

[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43 44	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53 54	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CK0 Rider Page 4A [(25)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [30] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [30] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[30]	
PLF17CK0	SPOUSE TERM RIDER [30]	[\$200,000]	[\$854.00]	

PLF17CKO Rider Page 4 [(30)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [30] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CKO Rider Page 4A [(30)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [35] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [35] YEARS

FORM NUMBER PLAN NAME		RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[35]	
PLF17CK0	SPOUSE TERM RIDER [35]	[\$200,000]	[\$1,026.00]	

PLF17CKO Rider Page 4 [(35)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [35] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A

[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73 74	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CK0 Rider Page 4A [(35)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PRIMERICA LIFE INSURANCE COMPANY

Executive Offices: [1 Primerica Parkway, Duluth, Georgia 30099-0001]

INSURED TERM INSURANCE RIDER

PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of Your Policy. This Rider is subject to the provisions of the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control. This Rider does not have cash values or loan values.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY – The person(s) to whom the rider proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed. (See Change of Beneficiary Provision, below)

INSURED - The person whose life the Policy insures and who is named in the Policy and Rider Specifications.

NOTICE TO US - Communication We have received from You which is acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE – The date shown on Rider Page 4 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE – The date shown on Rider Page 4 on which We issue the Rider to You. This date controls the below Incontestability and Suicide Exclusion provisions.

RIDER EXPIRY DATE - The date shown on Rider Page 4. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 4A.

RIDER ISSUE AGE – The Insured's age on the birthday nearest the Rider Date.

GENERAL PROVISIONS

CONSIDERATION – This Rider is issued in consideration of: (1) the application for this Rider and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS – Premiums for this Rider are payable in addition to the premiums for the Policy. The premiums shown on Rider Page 4A are for the premium payment option You chose. Total premium amounts for all available payment options are on Policy Page 3. Payment options other than annual result in a higher total annualized premium. You may change the premium payment option for future premium payments upon Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. Premiums for this Rider are not due for any period after the Insured's death, the Rider Expiry Date or when this Rider terminates.

PLF17CL0 11.17

CHANGES IN PREMIUM INITIATED BY YOUR REQUEST – Changes to a benefit amount, Premium Class (e.g. Preferred), or any riders, including adding or deleting riders, requested by You and approved by Us, or riders expiring by their own terms, will change Your scheduled and maximum premiums. Because of higher unit costs at lower insurance coverage amounts, reductions or deletions in policy or rider coverage, including those that result in a change to a Premium Class because minimum insurance amounts for a Premium Class are no longer met, may cause an increase or decrease in premium. Changes to issue age after REINSTATEMENT as described below may also increase Your scheduled and maximum premiums.

PREMIUM CHANGES BY COMPANY – Premiums for this Rider as originally issued will be the scheduled premiums shown on Rider Pages 4 and 4A, unless changed by Us, or You as described above. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the then in effect maximum premiums shown on Rider Page 4A. Any such change will apply uniformly to all riders of this form issued to Insureds having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses, except as may occur in connection with CHANGES IN PREMIUM INITIATED BY YOUR REQUEST, or a REINSTATEMENT which results in changes in insurance age(s).

If We change scheduled premiums, other than as described above in *CHANGES IN PREMIUM INITIATED BY YOUR REQUEST*, We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

INCONTESTABILITY – We will not contest coverage under this Rider after it has been in force for two years during an Insured's life except for non–payment of premium. The two years begin on the Rider Date of Issue of such coverage. If any person insured under the Rider dies within two years from the issue date of any coverage on that person: (1) Primerica Life may contest such coverage under the Rider; and (2) such coverage may be rendered void if Primerica Life determines that any information in the application related to such coverage is false, incomplete or incorrect.

SUICIDE EXCLUSION – If the Insured dies by suicide, while sane or insane, within two years of the Date of Issue of any coverage, We are only liable for the premiums paid for such coverage. For reinstated riders, the two year period begins anew.

REPLACED COVERAGE – If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60–day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, the Insured is insured under another company's policy for \$100,000 and that policy has been in force two years. If this Rider replaced the other company's policy, We would not contest this Rider for up to \$100,000. We would, however, be able to contest any amount over \$100,000.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

CHANGE OF BENEFICIARY – You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocable on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date of the Notice to Us, unless otherwise specified by You. If the Insured dies before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION – This Rider terminates and is no longer in force: (1) upon cancellation; (2) upon termination of the policy; (3) upon the death of the Insured; (4) upon nonpayment of premiums, in accordance with the provisions of the policy; (5) upon exchange of this Rider; or (6) on the Rider Expiry Date.

REINSTATEMENT – If termination occurs due to unpaid premium, this Rider may be reinstated subject to the provisions of the Policy.

CANCELLATION – You may cancel this Rider at any time by Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION – You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan or the Decreasing Term Insurance to Age 100 Plan described in the Policy. The new plan will be issued at Our premium rates for that plan for the Insured's Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 4. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised rider specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Rider is in force on the exchange date; and (6) premiums for Your current Rider are not being waived.

EXCHANGE AT POLICY EXPIRY – If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the issue date of the policy will be the day We receive Notice to Us for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.

Stacy & Slen
[Secretary]



POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [20] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [20] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[20]
PLF17CL0	INSURED TERM RIDER [20]	[\$200,000]	[\$684.00]

PLF17CL0 Rider Page 4 [(20)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [20] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00 \$684.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CL0 Rider Page 4A [(20)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [10] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [10] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[10]
PLF17CL0	INSURED TERM RIDER [10]	[\$200,000]	[\$338.00]

PLF17CL0 Rider Page 4 [(10)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [10] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43 44	\$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00	\$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00 \$338.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53 54	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$1,626.00 \$1,626.00 \$1,626.00 \$1,626.00 \$1,626.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CL0 Rider Page 4A [(10)] 11.17

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

(152.) 0. 201. 10... 10...

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [15] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [15] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[15]
PLF17CL0	INSURED TERM RIDER [15]	[\$200,000]	[\$550.00]

PLF17CL0 Rider Page 4 [(15)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [15] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$550.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$1,582.00 \$1,582.00 \$1,582.00 \$1,582.00	\$550.00 \$550.00 \$550.00 \$550.00 \$550.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00 \$2,896.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$2,568.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$4,818.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CL0 Rider Page 4A [(15)] 11.17

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

RIDER SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [25] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [25] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[25]
PLF17CL0	INSURED TERM RIDER [25]	[\$200,000]	[\$770.00]

PLF17CL0 Rider Page 4 [(25)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [25] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00 \$4,232.00	\$770.00 \$770.00 \$770.00 \$770.00 \$770.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00 \$7,380.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CL0 Rider Page 4A [(25)] 11.17

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

RIDER SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [30] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [30] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[30]
PLF17CL0	INSURED TERM RIDER [30]	[\$200,000]	[\$854.00]

PLF17CL0 Rider Page 4 [(30)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [30] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00 \$854.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$6,860.00 \$6,860.00 \$6,860.00 \$6,860.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$10,956.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CL0 Rider Page 4A [(30)] 11.17

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

RIDER SPECIFICATIONS

(152)(0) 2011 10/(110)(

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]

RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [NOVEMBER 01, 2017]

RIDER FACE

AMOUNT: [\$200,000] RIDER DATE: [NOVEMBER 01, 2017]

PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [NOVEMBER 01, 2077]

[TOBACCO, NICOTINE]

INITIAL LEVEL PREMIUM PERIOD FOR [35] YEARS SCHEDULED PREMIUMS ARE GUARANTEED FOR [35] YEARS

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-[35]
PLF17CL0	INSURED TERM RIDER [35]	[\$200,000]	[\$1,026.00]

PLF17CL0 Rider Page 4 [(35)] 11.17

^{*}The Scheduled Annual Premiums shown above are guaranteed for [35] years. All premiums for the premium payment option You chose are shown on Rider Page 4A. Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.



TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01 [02 [03 [04 [05 [06 [07 [08 [09 [10	35 36 37 38 39 40 41 42 43	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[11 [12 [13 [14 [15 [16 [17 [18 [19 [20	45 46 47 48 49 50 51 52 53	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[21 [22 [23 [24 [25 [26 [27 [28 [29 [30	55 56 57 58 59 60 61 62 63 64	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[31 [32 [33 [34 [35 [36 [37 [38 [39 [40	65 66 67 68 69 70 71 72 73	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$8,946.00 \$10,212.00 \$11,610.00 \$13,172.00 \$14,924.00	\$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$1,026.00 \$14,206.00 \$15,520.00 \$16,976.00 \$18,550.00 \$20,284.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

PLF17CL0 Rider Page 4A [(35)] 11.17

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D) [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41 [42 [43 [44 [45 [46 [47 [48 [49 [50	75 76 77 78 79 80 81 82 83 84	\$16,908.00 \$19,062.00 \$22,652.00 \$26,762.00 \$31,534.00 \$37,188.00 \$43,964.00 \$51,712.00 \$60,308.00 \$70,408.00	\$22,042.00 \$23,966.00 \$26,046.00 \$28,294.00 \$31,782.00 \$38,460.00 \$44,776.00 \$52,312.00 \$61,040.00 \$71,638.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]
[51 [52 [53 [54 [55 [56 [57 [58 [59 [60	85 86 87 88 89 90 91 92 93	\$82,224.00 \$95,994.00 \$104,410.00 \$113,440.00 \$122,936.00 \$132,742.00 \$142,850.00 \$153,272.00 \$163,992.00 \$175,020.00	\$83,182.00 \$96,858.00 \$105,788.00 \$115,880.00 \$125,474.00 \$136,520.00 \$148,300.00 \$161,152.00 \$175,710.00 \$193,568.00	\$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00] \$200,000.00]

^{*}Premiums will not change except as described in the Premium Payments, Changes In Premium Initiated By Your Request, and Premium Changes By Company provisions.

SERFF Tracking #: PRMD-131318935 State Tracking #: Company Tracking #: PLF17DJ0 F

State: District of Columbia Filing Company: Primerica Life Insurance Company

TOI/Sub-TOI: L04I Individual Life - Term/L04I.500 Other

Product Name: Individual Term Insurance

Project Name/Number: TermNow & Custom Advantage/PLF17DJ0

Supporting Document Schedules

Satisfied - Item:	Statements of Variability
Comments:	
Attachment(s):	TermNow SOV DC.pdf TermNow Riders SOV generic.pdf Custom Adv SOV DC.pdf Custom Adv Riders SOV generic.pdf
Item Status:	
Status Date:	
Satisfied - Item:	DC Disclosures
Comments:	
Attachment(s):	DC Disclosures.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Authorization Letter
Comments:	
Attachment(s):	3rd party authorization letter.pdf
Item Status:	APPROVED
Status Date:	01/04/2018

STATEMENT OF VARIABILITY

TERM NOW SERIES

Policy Form PLF17DJ0DC with 20 yr. term specifications pages

Face Page

The Secretary and President signatures are variable and will change if the individuals holding either of those offices changes.

The Company address, telephone numbers and website address may change. All other variable items are on the specifications pages only.

Page 3

The policy number, insured name, issue age, issue date, face amount, policy date, premium class, expiry date and scheduled annual premiums are variable. The policy may be issued with variable initial terms of 10, 15, 20, 25, 30 or 35 years. Determination of these variable components depends upon the particular insured person, and class and insurance amount issued.

The first year and total year cost for the first year under four different payment schedules (annual, semiannual, quarterly, monthly) are variable presentations of the premium amount.

The Department of Insurance phone number is variable and will change based on the phone number for the particular Department of Insurance.

Page 3A

The policy year, attained age, scheduled annual premium, maximum annual premium and face amount are variable depending upon these factors.

STATEMENT OF VARIABILITY Term Now Series

PLF17DL0 Insured Term Life Rider with 20 year term Specifications Pages

PLF17DK0 Spouse Term Insurance Rider with 20 year term Specifications Pages

Face Page

The Company address, telephone number and website address may change.

Rider Page 3

The Secretary and President signatures are variable and will change if the individuals holding either of those offices changes.

All other variable items are on the specifications pages only.

Rider Page 4

The policy number, insured name, rider issue age, rider issue date, rider face amount, rider date, premium class, rider expiry date and scheduled annual premiums are variable. The riders may be issued with variable initial terms of 10, 15, 20, 25, 30 or 35 years.

Determination of these variable components depends upon the particular insured person, and class and insurance amount issued.

Rider Page 4A

The rider years, rider attained age, scheduled annual premiums, maximum annual premiums and rider face amount are variable depending upon these factors.

STATEMENT OF VARIABILITY

CUSTOM ADVANTAGE SERIES

Policy Form PLF17CJ0DC with 20 yr. term specifications pages

Face Page

The Secretary and President signatures are variable and will change if the individuals holding either of those offices changes.

The Company address, telephone numbers and website address may change. All other variable items are on the specifications pages only.

Page 3

The policy number, insured name, issue age, issue date, face amount, policy date, premium class, expiry date and scheduled annual premiums are variable. The policy may be issued with variable initial terms of 10, 15, 20, 25, 30 or 35 years. Determination of these variable components depends upon the particular insured person, and class and insurance amount issued.

The first year and total year cost for the first year under four different payment schedules (annual, semi-annual, quarterly, monthly) are variable presentations of the premium amount.

The Department of Insurance phone number is variable and will change based on the phone number for the particular Department of Insurance.

Page 3A

The policy year, attained age, scheduled annual premium, maximum annual premium and face amount are variable depending upon these factors.

STATEMENT OF VARIABILITY Custom Advantage Series

PLF17CLO Insured Term Life Rider with 20 year term Specifications Pages

PLF17CKO Spouse Term Insurance Rider with 20 year term Specifications Pages

Face Page

The Company address, telephone number and website address may change.

Rider Page 3

The Secretary and President signatures are variable and will change if the individuals holding either of those offices changes.

All other variable items are on the specifications pages only.

Rider Page 4

The policy number, insured name, rider issue age, rider issue date, rider face amount, rider date, premium class, rider expiry date and scheduled annual premiums are variable. The riders may be issued with variable initial terms of 10, 15, 20, 25, 30 or 35 years.

Determination of these variable components depends upon the particular insured person, and class and insurance amount issued.

Rider Page 4A

The rider years, rider attained age, scheduled annual premiums, maximum annual premiums and rider face amount are variable depending upon these factors.



Primerica Life Insurance Company

Executive Office: 1 Primerica Parkway Duluth, Georgia 30099-0001 1-800-257-4725

APPLICATION AGREEMENT, ACKNOWLEDGEMENTS AND AUTHORIZATIONS

By Our signatures, We, Us and I (Owner, Applicant and all Insureds) understand and agree that:

Primerica offers two term life insurance policy series that provide the same death benefit at certain ages and face amounts. Neither has cash value. The Custom Advantage Series may offer insurance at a lower cost but requires more underwriting requirements, including a paramedical examination and bodily fluid (blood and urine) testing. The TermNow Series offers insurance through a streamlined underwriting process that typically does not require bodily fluid testing. We have applied for the policy we want.

In the sale or service of Primerica Insurance, Primerica agents represent Primerica Life Insurance Company and may provide services to Us for Primerica Life Insurance Company (the "Company"). Agents do not have the authority to accept risk, pass on insurability, or make void, waive or change any conditions or provisions of the Application, policy or receipt.

If applying on a paper application, We have received pages 10-23. If applying electronically, We have received a disclosure booklet.

By signing below, We agree that We have read, understand and accept the terms of the: Application; Application Agreement, Acknowledgements and Authorizations; Application Agreement and Conditional Coverage; Fraud Notice/Warning; Payment Election Form; HIPAA Authorization; Disclosure for Motor Vehicle Reports, Investigative Consumer Reports and MIB, Inc.; Electronic Fund Transfer (EFT) Authorization; Consent to Electronic Communications and Delivery of Policy and Related Disclosures (E-SIGN Consent); Advance Premium Deposits Agreement Disclosure; Terminal Illness Accelerated Benefit Disclosure; Increasing Benefit Rider Disclosure; Prior Express Consent to Call Cellular and Mobile Telephone Numbers; Notice and Consent for Blood and Body Fluid Testing; District of Columbia Guaranty Association Notice; and Life Insurance Buyer's Guide.

I/We hereby authorize MIB, Inc. to give the Company or its reinsurers any records of me/us or my/our health. I/We also authorize the Company or its reinsurers to make a brief report of my/our personal health information to MIB, Inc. A photographic copy of this authorization shall be as valid as the original.

If we elected on the Payment Election Form to make policy premium payment(s) by a One-Time EFT and/or by Monthly EFTs and the owner of the bank account from which any EFTs will be made ("Bank Account Owner") is a different person than the Owner, the Owner agrees to provide a copy of any Policy and any subsequent payment schedules that are issued to the Bank Account Owner immediately upon receipt of the Policy and schedules.

A Sales Illustration is a disclosure document that includes policy costs, benefits and other important information. No matching Sales Illustration was used in this sale. If a policy is issued, a matching Sales Illustration will be provided with the policy. Instead of a Sales Illustration, We may receive a Statement of Policy Cost and Benefit Information.

The approval of insurance for the proposed insured(s) is based on the representations made regarding use of tobacco or nicotine, responses to medical questions and other application information. False representations will result in a denial of coverage in a claims investigation and may be considered insurance fraud.

If the Bank Account Owner who makes any check payment or authorizes any EFT is a different person than the Owner or Insured, the Bank Account Owner, by signing below, agrees to the terms of the Payment Election Form, the Electronic Fund Transfer (EFT) Authorization, and the Consent to Electronic Communications and Delivery of Policy and Related Disclosures (E-SIGN Consent) and agrees that he or she received a copy of the Electronic Fund Transfer (EFT) Authorization.

APPLICATION AGREEMENT

By signing the Application, We, Us, I and Our (Applicant and all Insureds) represent that: (1) All of the information in the Application and all additions to the Application (such as examination reports and amendments) are true and complete to the best of Our knowledge and belief. (2) If a Spouse Rider is being applied for, Proposed Insured and Spouse Insured are lawful spouses or the equivalent for life insurance purposes. (3) The statements and answers in the Application and any other evidence of insurability are the basis for and become a part of the policy, and no information about Us will be considered to have been given unless it is stated in the Application. (4) Upon delivery, either by paper or electronically, We will review it to confirm that Our responses are true and complete. (5) Prior to accepting any issued coverage, We will also review all policy and disclosure documents in the policy kit, including the sales illustration or policy summary. These documents show any premium and benefit changes that occur over the period of coverage. (6) We acknowledge that Primerica Life Insurance Company (the "Company") relies on this information to determine whether, and on what terms, to issue a policy. Our acceptance of Our policy will be considered Our confirmation of the accuracy of Our Application information. If the Application information is false, incorrect, or incomplete, We will immediately inform Our agent or the Company. (7) We will accept return of any amount paid with the Application if the Company does not approve the Application. (8) We understand that if any person insured under the policy dies within two years from the issue date of any coverage on that person: (a) the Company may contest such coverage under the policy; and (b) such coverage may be rendered void if the Company determines that any information in the application related to such coverage is false, incomplete or incorrect.

CONDITIONAL COVERAGE

We understand and agree that, but for Conditional Coverage, no insurance will be in effect until a policy is issued on the Application and delivered to and accepted by Us and the first premium due is paid in full while We are alive. Conditional Coverage occurs when all of the following conditions are met: (1) All of the information in the Application and any additions to the Application must be true and complete. (2) The proposed Insured(s) must be a standard risk according to the Company's underwriting rules. (3) All items concerning insurability (including, but not limited to, the results of medical examinations or body fluid studies and attending physician statements) must be received. (4) At least one full month's premium (but not more than the amount required to purchase \$500,000 of insurance for each Insured exclusive of any riders) for the policy applied for must be received with the Application. (5) If the Proposed Insured(s) dies by suicide, while sane or insane, before the policy is issued, We are only liable for the premiums paid.

EFFECTIVE DATE OF CONDITIONAL COVERAGE

Any Conditional Coverage will become effective on the date the Application is signed, or the date the Company receives the results of all required tests and exams or other requested information, whichever is later.

CONDITIONAL COVERAGE AMOUNT AND LIMIT

The amount of insurance provided under this Conditional Coverage is the amount applied for and for which current premium has been paid, but not exceeding \$500,000 for each proposed insured.

FRAUD NOTICE/WARNING

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is quilty of a crime and may be subject to fines and confinement in prison.

PAYMENT ELECTION FORM* (as used in this Election, "you" and "your" means the proposed Policy Owner/Applicant or third party payor, if a different person than the Policy Owner/Applicant, and "we" and "us" means Primerica Life).

Payment with Application Options. The payment of the "CWA Amount" specified on page 1 of the Application can be made by check or by directing us to initiate a one-time electronic fund transfer ("EFT") from a deposit account ("bank account") you designate. We will credit any such payment toward the premium due on any policy we issue. We will initiate this EFT when we receive the signed Application, which may be as soon as the business day after the Application is signed.

Policy Premium Payment Options. You have five options for paying the premium due on any policy we issue: (1) We can send you a bill annually (Annual Direct Bill). (2) We can send you a bill twice a year (Semi-Annual Direct Bill). (3) We can send you a bill four times a year (Quarterly Direct Bill). (4) You can direct us to initiate electronic fund transfers ("EFTs") from a bank account you designate on a monthly basis (Monthly EFTs). (5) If you receive income from the government that can be subject to an allotment, you can set up a monthly allotment from that income (Monthly Government Allotment). *You may save money by paying the premium on an annual basis. Semi-annual, quarterly, and monthly premiums include additional premium charges. Whether you will save money depends upon a number of factors, including the interest rate applicable to your savings or other account and/or the interest or other cost to you of borrowing money from a third party to make an annual premium payment rather than periodic payments. If you would like additional information, including information about the cost of our periodic payments, please contact your representative. If you choose to pay by Monthly EFTs, you can specify the day of the month around which you want us to initiate the EFTs. If you do not specify, we will assume you want the deductions to occur on the first day of the month. If you choose to enter into an Advance Premium Deposits Agreement ("APDA"), the APDA amount specified on page 2 of the Application will be added to your annual, semi-annual or quarterly bill, Monthly EFT or Monthly Government Allotment.

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) AUTHORIZATION For Use and Disclosure of Protected Health Information

By Our signatures below or by Our electronic signatures, if the electronic application process is used:

(1) We (Owner, Applicant and all Insureds) authorize Primerica Life Insurance Company, its affiliates, (collectively the "Company"), reinsurers, and authorized representatives, including Agents, insurance support organizations, MIB, Inc., and service providers to receive Our health information in any format (including but not limited to paper and/or electronic format). (2) We acknowledge that health information may include information about prescription histories, the diagnosis, treatment and prognosis of any physical or mental condition and the use of drugs or alcohol, but not psychotherapy notes. (3) We authorize any licensed physician, medical practitioner, hospital, clinic, laboratory, Veteran's Administration, government facility, pharmacy, pharmacy benefit manager, insurance company, clearinghouse, or other entity or person ("Providers") to disclose Our health information. (4) We acknowledge that this Authorization may be relied upon to determine Our eligibility for insurance, to obtain reinsurance, to administer any claim for insurance benefits or for any other business purpose not otherwise prohibited, including but not limited to any activities related to coverage, benefits, research and development, or to support the business operations of the Company. (5) We acknowledge that this Authorization expires two (2) years from the date it is signed which complies with the time limit, if any, permitted by applicable law in the state where a policy would be delivered or issued for delivery. (6) We acknowledge that we may revoke this Authorization at any time by sending written notice to the Company's address, however, any revocation will not apply retroactively or prevent the Company from contesting a claim for insurance benefits or the policy itself. (7) We acknowledge that if we refuse to sign this Authorization, a Provider may not refuse to provide treatment or payment for health care services, however the Company may not be able to process the Application or, if coverage is issued, make any benefit payments. (8) We acknowledge that information disclosed pursuant to this Authorization may be redisclosed and no longer covered by certain federal rules governing privacy of health information. (9) We acknowledge that a photographic copy of this Authorization, including a photographic or electronic copy of Our signature, is valid as the original and We may receive a copy of this Authorization after it is signed.

\rightarrow		\rightarrow	
	Signature of Primary Insured		Signature of Spouse (if proposed for coverage)
	Date		Date – –

Page 2 PLA-209 DC 06.15

DISCLOSURE FOR MOTOR VEHICLE REPORTS, INVESTIGATIVE CONSUMER REPORTS AND MIB, INC.

As part of the Company's regular underwriting procedure, the Company may obtain a Motor Vehicle Report (MVR) showing detailed driving history and an Investigative Consumer Report (ICR), which will contain personal information concerning your character, habits, general reputation, personal characteristics and mode of living, except as may be related directly or indirectly to your sexual orientation. If an ICR is obtained, personal interviews with your neighbors, friends, associates and acquaintances may be conducted. In the event that an ICR is obtained, you understand that you may request to be interviewed in connection with the ICR and that a right of access and correction exists with respect to the ICR and all personal information collected. Upon written request to the Company at 1 Primerica Parkway, Duluth, GA 30099-0001, further detailed information on the nature and scope of both the MVR and ICR will be provided.

Information regarding your insurability will be treated as confidential. By submitting the Application, all Proposed Insureds authorize the Company or its reinsurers to make a brief Report on your personal health information to the MIB, Inc., a not-for-profit membership organization, which operates an information exchange on behalf of its members. If you apply to another MIB member company for life or health insurance coverage, or a claim for benefits is submitted to such a company, MIB, upon request, will supply such company with the information about you in its file.

Upon receipt of a request from you, MIB will arrange disclosure of any information in your file. Please contact MIB at 866-692-6901 (TTY 866-346-3642). If you question the accuracy of the information in MIB's file, you may contact MIB and seek a correction in accordance with the procedures set forth in the federal Fair Credit Reporting Act. The address of MIB's information office is 50 Braintree Hill Park, Suite 400, Braintree, Massachusetts 02184-8734.

The Company, or its reinsurers, may also release information from its file to other insurance companies to whom you may apply for life or health insurance, or to whom a claim for benefits may be submitted. Information for consumers about MIB may be obtained on its website at www.mib.com.

INCREASING BENEFIT RIDER DISCLOSURE

Primerica Life policies offer a unique protection benefit, the Increasing Benefit Rider. This coverage is provided to our clients, Insured and Spouse, who are under the insurance age of 56 and issued non-rated coverage. This rider offers an automatic 10% increase in the face amount coverage issued for 10 years. No additional underwriting is required. Each coverage increase comes with a premium increase which is shown in the issued policy. The maximum additional coverage under the Increasing Benefit Rider is \$500,000. Increases will occur on policy anniversaries, beginning at the start of the second year. Before each increase, a notice will be sent to Your address of record describing the new coverage and premium. You may decline any increase. If any annual increase is ever declined, all future increases will be discontinued.

TERMINAL ILLNESS ACCELERATED BENEFIT DISCLOSURE

This Benefit is not a long term care policy.

The Benefit provides that if You become terminally ill with a life expectancy of six months or less, the Owner may choose to request the Accelerated Benefit. This Benefit provides an accelerated payment of 40% of Your death benefit under the Policy and/or Rider not to exceed a maximum of \$250,000. If the terminally ill insured also has a Disability Waiver of Premium Benefit Rider or Spouse Disability Waiver of Premium Benefit Rider, the accelerated payment is 70% of Your death benefit under the Policy and/or Rider not to exceed a maximum of \$400,000.

The Accelerated Benefit payment will only be paid upon a diagnosis of a Terminal Illness, which is a noncorrectable medical condition that with reasonable medical certainty, will result in Your death in six months or less from the date of the Physician Statement.

There is a one time administrative fee of \$200.00 plus interest. The interest rate is stated in the Benefit.

Payment of this Benefit will result in a lien against the proceeds of your policy. For example, if you have a policy with a Face Amount of \$100,000, you may apply for \$40,000. You will be paid the \$40,000 upon approval of your claim. Assuming the annual interest rate is 3% and death occurs four months after the Accelerated Benefit is paid, \$40,000 plus the \$200.00 administrative fee plus 3% for four months on \$40,200, for a total of \$40,602, will be deducted from the death benefit proceeds.

Payment of the Accelerated Benefit will have no effect on the amount of future payments, if any, required under this policy.

If you do not have a waiver of premium, you are still obligated for future premiums.

ANY ACCELERATED BENEFIT PAID UNDER THIS POLICY MAY BE TAXABLE. A PERSONAL TAX ADVISOR SHOULD BE CONSULTED.

PAYMENT OF ANY ACCELERATED BENEFIT MAY ALSO ADVERSELY AFFECT THE RECIPIENT'S ELIGIBILITY FOR MEDICAID AND OTHER GOVERNMENT BENEFITS OR ENTITLEMENTS.

THIS DISCLOSURE IS NOT A CONTRACT. IT IS INTENDED ONLY AS A SUMMARY OF THE BENEFIT PROVISIONS. IN ALL CASES, CONSULT YOUR POLICY FOR FULL DETAILS AND RESTRICTIONS.

Page 3 PLA-209 DC 06.15

ELECTRONIC FUND TRANSFER ("EFT") AUTHORIZATION

As used in this EFT Authorization ("Authorization"), "you" and "your" mean the owner of any deposit account identified on page 7 of the Application, "we," "us" and "our" mean Primerica Life Insurance Company and its successors, assigns and agents, "Account" means the deposit account identified on page 7 of the Application and "Bank" means the financial institution identified on the voided check attached to the Application or identified on page 7 of the Application.

Authorization for One-Time EFT for Payment with Application. If the election was made on page 7 of the Application to make a payment with the Application by One-Time EFT (see "Payment Election Form"), you authorize us to initiate an EFT from the Account for the CWA Amount specified on page 1 of the Application (and on page i of this Booklet). **We will initiate this EFT when we receive the signed Application, which may be as soon as the business day after the Application is signed**.

Authorization for Monthly EFTs for Policy Premium Payments and APDA Payments. If the election was made on page 7 of the Application to make policy premium payments by Monthly EFTs (see "Payment Election Form"), if a policy is issued, you authorize us to initiate EFTs from the Account for the amount of the monthly premium specified in the policy. These EFTs will be initiated on or after the day of the month specified in the Policy Premium Payment Election. If this day of the month is not a business day or does not occur in a particular month, the Monthly EFT will generally be initiated on or after the next business day. If no day of the month is chosen, the EFTs will be initiated on or after the first day of the month. If an Advance Premium Deposits Agreement ("APDA") has been executed, you further authorize us to add to the Monthly EFT we initiate for the monthly premium the lesser of (1) the APDA amount elected on page 2 of the Application or (2) the difference between (a) \$5,000 (or such lesser amount prescribed by law for total accrued APDA payments) and (b) the total accrued and unapplied APDA payments for the policy.

The following terms apply to all EFTs except as specified:

Returned EFTs: In the event that an EFT is returned unpaid, you authorize us to reinitiate the EFT as permitted by the applicable payment network rules and to initiate a separate EFT for any returned-payment fee due under any policy that is issued in connection with the Application identified above. You understand that your Bank may charge you a fee if an EFT is returned unpaid, and you agree that we will have no liability for any such fee.

Error Correction; Refund; Modified EFTs: In the event that an error is made in processing an EFT, you authorize us to initiate an EFT to the Account to correct the error. In the event that you are due a refund or we otherwise owe you money, you authorize us to initiate EFTs to the Account to credit the Account for the funds due and owed. You further authorize us to initiate EFTs to the Account in the amounts and on the dates you may specify by email, fax, text message or telephone call.

Account Updates: In the event that you supply us with updated information for the Account or request that we initiate EFTs with respect to a different bank account, you authorize us to initiate the EFTs described in this Authorization using the updated information or new account.

Termination: You understand and acknowledge that you may terminate this Authorization by notifying us using the following contact information at least five (5) business days before any scheduled EFT or in sufficient time as to allow us and your Bank a reasonable opportunity to act on your request: E-mail - PLIC@primerica.com; U.S. Mail - Primerica, 1 Primerica Parkway, Duluth, GA 30099-0001; Toll-free Telephone Number - 1-800-257-4725. You understand that we cannot stop an EFT once it has been fully initiated. You understand that we will terminate this Authorization and stop seeking payment by Monthly EFT if any such EFT is returned unpaid twice or we are not permitted by the applicable payment network rules to reinitiate or initiate an EFT. If this occurs, you direct us to change your payment method to direct quarterly billing, unless you otherwise instruct us using the contact information above. We will not be liable for any loss, damage or expenses of any kind or nature, including the forfeiture of insurance resulting directly or indirectly from, or in any way connected with the rejection, return, reversal or readjustment of your EFT by your Bank.

Confirmation of EFTs: You may contact us using the contact information above or the Bank to determine if an EFT was successful (after allowing time for the EFT to clear the Account).

Discontinuation of EFT Service: We reserve the right to discontinue initiating EFTs for any payments at any time in our sole discretion. In the event we discontinue EFTs, you will need to make arrangements to pay amounts owed under the policy by another means.

Check Payments: When you provide a check as payment, you authorize us either to use information from your check to make a one-time EFT from your account or to process the payment as a check transaction.

ADDITIONAL INSURANCE REQUEST UPON A RATE CLASS UPGRADE

If a policy is issued at a better rate class than applied for, you may request additional coverage, as described in the below Increase Request, by asking your Representative.

For TermNow Policies Only: AUTOMATIC INCREASE REQUEST

By choosing the Automatic Increase Request (AIR) for the proposed Insured and/or Spouse Insured, Primerica Life Insurance Company (the "Company") will automatically increase the insurance amount issued if the Company is able to issue coverage at a better underwriting rate class than applied for. As the result of issuing the coverage at a better underwriting rate class, Primerica Life is able to lower the unit cost of the insurance applied for. By choosing the AIR option, the cost saving realized as the result of the lower unit cost will be used to purchase additional life insurance (and if applied for and issued, the corresponding Waiver of Premium coverage) for an insured in units of \$1,000, up to \$300,000 for TermNow coverage. Any difference in the amount paid with the application and the new policy premium, after the AIR increase, will be refunded. The additional insurance will be added to the base Policy for the Insured and longest level term rider for Spouse Insured.

Page 4 PLA-209 DC 06.15

CONSENT TO ELECTRONIC COMMUNICATIONS AND DELIVERY OF POLICY AND RELATED DISCLOSURES (E-SIGN CONSENT)

As used in this Consent to Electronic Communications and Delivery of Policy and Related Disclosures (E-SIGN Consent), "you" and "your" mean the proposed Policy Owner/Applicant and "we," "us" and "our" mean Primerica Life Insurance Company and its successors, assigns and agents. By consenting to Electronic Consent on page 1 of the Application, you agree to electronic communications and delivery of your Primerica Life insurance policy and related materials, as well as each of the following terms:

Access and Delivery of Your Policy

If your policy is issued, you will receive an email from us at your email address letting you know that your policy is available at myprimerica.com. You agree to promptly access and view your policy once you receive this email. Your right to cancel your policy, receive a complete refund, and our right to contest a claim based on statements in your application may depend on when you receive your policy. You are considered to have received your policy when we notify you at your email address and tell you that your policy is available. Until a policy is issued and delivered to you at myprimerica.com, only Conditional Coverage, if any, exists.

Scope of Communications To Be Provided in Electronic Form

You agree that we may provide you with any communications that we may choose to make available in electronic format, to the extent allowed by law, unless and until you withdraw your consent as described below. We may also continue sending paper communications to you. Your consent to receive electronic communications covers all information relating to your policy with us, which includes, but is not limited to, all notices, disclosures, authorizations, acknowledgements and other documents relating to your life insurance application and policy.

Electronic Form and Hardware/Software Requirements

Your policy and other information to be provided will be in pdf format. You acknowledge that you have access to the internet and can open materials sent in pdf format. To obtain free pdf software, go to www.adobe.com. The computer hardware and software used to access the Internet is all you will need to view your life insurance policy and other information. To retain a copy of these materials, you may save them, print them or email them to where you can save or print them. To save an electronic copy, you may need up to 13,000 bytes per page. You may also view your policy and other information at any time by logging onto myprimerica.com.

How to Update Your Email Address

To update your email address either email us at PLIC@primerica.com or write to us at 1 Primerica Parkway, Duluth, GA 30099 and tell us your previous email address, your new email address and policy number.

How to Withdraw Consent or Request Paper Copies

If you would like to receive a paper copy of your policy and related disclosures or to withdraw consent to receive future notices and disclosures in electronic form, you must either email us at PLIC@primerica.com or write to us at 1 Primerica Parkway, Duluth, GA 30099 and tell us your full name, email address, US Postal address, telephone number and policy number. There is no cost or charge for receiving a paper copy of your policies and related disclosures.

Troubleshooting

If you have trouble accessing myprimerica.com to view your policy and related disclosures, you may contact us at 1-866-643-9270.

PRIOR EXPRESS CONSENT TO CALL CELLULAR AND MOBILE TELEPHONE NUMBERS

By providing the proposed Insured's and proposed Spouse Insured's (collectively the "Proposed Insureds") cellular or mobile telephone numbers in the Application, the Proposed Insureds are providing their prior express consent that Primerica Life Insurance Company (the "Company"), any of the Company's affiliates and any service providers that assist the Company may call the Proposed Insureds' cellular or mobile telephone numbers using technology that includes automated dialing systems and artificial and prerecorded messages in connection with processing the Application and servicing the life insurance policy issued pursuant to the Application.

Page 5 PLA-209 DC 06.15

ADVANCE PREMIUM DEPOSITS AGREEMENT DISCLOSURE

By choosing to pay an additional amount towards your premiums, You are authorizing the Company to either directly bill You or collect from Your account that amount. The balance of these payments may not exceed \$5,000 or the maximum permitted under state law (provided that no additional requirements are necessary), whichever is less. If the balance of Your Advance Premium Deposits is less than \$10.00 and no Advance Premium Deposits have been made within the last 12 months, We may return the balance to You. Upon written request, at no charge, You may withdraw a minimum of at least \$100, or the entire balance amount, whichever is less. You will receive an annual statement showing Your balance, Your transactions and any interest earned.

ANNUAL INTEREST — You will earn interest on the balance of Your Advance Premium Deposits based in part on current market conditions. The interest rate is variable, but will not be less than the Benchmark Rate, which is the rate published on the website www.imoneynet.com/retail-money-funds/index.aspx for the Retail Rate National Averages, Savings and Money Market Accounts, "Regular Savings \$10k". The published rate as of the last business day of a month will be the effective Benchmark Rate for the following month (for example, the effective Benchmark Rate for September would be the rate published as of the last business day of August on the imoney.net website). The interest earned on Your Advance Premium Deposits is taxable. You should consult a tax advisor. The interest rate You earn on Your Advance Premium Deposits is not tied to, and may be less than, Primerica Life Insurance Company's earnings on its general account. Interest rates may change without notice. You may obtain the current rate by calling Our toll-free number, 1-800-257-4725, Monday through Friday between 8:00 a.m. and 5:00 p.m. Eastern Standard Time.

At the end of each Policy Year in which there is a balance in the Advance Premium Deposits, We will credit interest based on the lesser of: 1) the existing balance of the Advance Premium Deposits, or 2) the average balance during the policy year just completed. We reserve the right to make changes to these terms and conditions, including selecting a different Benchmark Rate on which to base interest rates credited. In the event of changes, notice of the proposed changes will be sent to You. You will have 60 days to agree to these changes, otherwise You affirm these changes.

AUTOMATIC WITHDRAWAL OF DEPOSITS UPON PREMIUM DEFAULT — Unless otherwise instructed by You in writing, if any premium under the Policy remains unpaid on the date of default or any extended payment offer, whichever is later, We will withdraw from the Advance Premium Deposits, if sufficient, the amount of such premium necessary to pay the premium due based on the then current premium payment schedule and apply such amount for payment thereof. Your policy will continue to be in lapse mode and the balance of Your Advance Premium Deposits will be returned to You if the balance is insufficient to cover the premium due on the then current premium payment schedule.

TERMINATION AND SETTLEMENT – Upon termination of Your policy by reason other than death of the Insured, You will receive a check for the balance of the advance premiums plus any interest accumulated. In the event of the death of the Insured the then present balance of any Advance Premium Deposits plus any interest earned will be paid to the beneficiary.

THE SAFETY OF YOUR ADVANCE PREMIUM DEPOSITS BALANCE – Any Advance Premium Deposits balances are held by and remain an asset of Primerica Life Insurance Company. These balances are not insured by the Federal Deposit Insurance Corporation (FDIC); however, they are protected by state guaranty funds, up to state coverage limits (generally \$300,000).

THE BALANCE OF YOUR ADVANCE PREMIUM DEPOSITS FUNDS — We assume no responsibility whatsoever as to how the funds in Your Advance Premium Deposits balance are applied, except as described in AUTOMATIC WITHDRAWAL OF DEPOSITS UPON PREMIUM DEFAULT above. It is Your responsibility to consider whether and when to adjust Your premium payment schedule to a less frequent basis in order to reduce overall premium costs.

QUESTIONS OR TO STOP THE COLLECTIONS OF ADVANCE PREMIUMS – If You would like to stop the collection of advance premiums or if You have a question or need more information, call Our toll-free number, 1-800-257-4725, Monday through Friday between 8:00 a.m. and 5:00 p.m. Eastern Standard Time.

Page 6 PLA-209 DC 06.15

NOTICE FOR BLOOD, ORAL FLUID AND/OR URINE SPECIMEN TESTING TO DETERMINE THE PROBABLE CAUSATIVE AGENTS FOR AIDS

Dear Proposed Insured:

To evaluate eligibility for insurance coverage, it is requested that a sample of blood, oral and/or urine specimen be provided, in order that it may be tested to determine the probable causative agents of AIDS. Signing the application indicates that the procedure used in implementing this test has been explained and has been shown to be in full compliance with the protocol currently adopted by the Commissioner of Public Health for the District of Columbia. Additionally, by signing the application, it is agreed that this test may be performed and the underwriting decisions will be based on the test results.

PRE-TESTING CONSIDERATIONS:

Many public health organizations have recommended that before taking a test to determine the probable causative agents of AIDS, a person should seek counseling in order to become informed concerning the implications of such a test. In the event the test result is positive, one may wish to consider counseling, at his or her expense, subsequent to being tested. A listing of those public and private health care facilities providing such counseling may be obtained from the insurance company.

No insurer shall request or require you to take the testing protocol without first obtaining your or your legal guardian's signature on this consent form. You have the right to decide not to be tested and to not sign this form. Once the insurance company has asked you to sign this consent form, you or your legal guardian may wait 14 days before signing this informed consent.

DISCLOSURE OF TEST RESULTS:

All test results and the fact that a test occurred will be treated confidentially. The results of the test will be reported to the insurer identified on this form; the Proposed Insured or his or her legal guardian; a physician or health care provider designated on this form by the Proposed Insured; a court of competent jurisdiction pursuant to a lawful court order; and any person or entity involved solely in the underwriting process; and any other person or entity expressly named in a separate written authorization signed by the Proposed Insured. Results of the test shall not otherwise be disclosed.

AIDS TESTING PROTOCOL

An individual shall be considered as having been exposed to the Human Immunodeficiency Virus (HIV) if they test positive in both enzyme immunoassay and a Western Blot assay.

DEFINITIONS

<u>Enzyme Immunoassay (EIA)</u>: means a test licensed by the Federal Food and Drug Administration conducted in accordance with the manufacturer's specifications. EIA tests for examination of serum or plasma, oral fluid, or urine are licensed by the Food and Drug Administration. The EIA must be performed by a laboratory licensed by the U.S. Department of Health and Human Services (or by an equivalent state Department of Health) and enrolled in an approved proficiency evaluation program.

<u>EIA Interpretation</u>: a single test of a specimen found non-reactive is reported as negative for HIV infection and no further tests are indicated. A test found reactive is repeated on the same specimen in duplicate, if either of the two duplicates is found reactive the specimen is referred for Western Blot assay.

<u>Western Blot Assay (WB):</u> means an assay licensed by the Food and Drug Administration conducted in accordance with the manufacturer's specifications. WB tests for examination of serum or plasma, or oral fluid, or urine are licensed by the Food and Drug Administration. The WB must be performed on the same specimen found reactive in the EIA by a laboratory licensed by the U.S. Department of Health and Human Services (or by an equivalent state Department of Health) and enrolled in an approved proficiency evaluation program.

<u>WB Interpretation:</u> criteria for **positive** serum or plasma, oral fluid, or urine WB tests are established by the FDA in consultation with the Federal Centers for Disease Control and the Association of State and Territorial Public Health Laboratory Directors. Tests with no WB antibody to HIV are reported as **negative**. Tests with the antibodies which do not meet the criteria for positive are reported as indeterminate. Indeterminate findings require follow-up medical and laboratory examinations.

PROPORTION OF FALSE POSITIVE RESULTS EXPECTED WITH THIS PROTOCOL

According to the Centers for Disease Control and Prevention clinical data submitted by the manufacturers of Human Immunodeficiency Virus (HIV) antibody tests to the Food and Drug Administration (FDA) for licensure indicate that sensitivity and specificity of tests currently marketed in the United States are greater than 99%.

All blood, oral fluid and urine protocols licensed by the FDA follow the same test algorithm: specimens are tested singly by Enzyme Immunoassay (EIA) and if found reactive are retested in duplicate. If either duplicate is reactive, the specimen is considered repeatedly reactive and is submitted for Western Blot (WB) test. Specimens found reactive by WB are reported as positive for HIV antibodies. Although a positive WB indicates infection with HIV, a diagnosis of Acquired Immunodeficiency Syndrome (AIDS) can only be made clinically if a person meets the case definition of AIDS established by the Centers for Disease Control and Prevention (1).

Data show that the specificity of this EIA-WB test algorithm in a population of low prevalence is equal to, or greater than, 99.9% (2). Thus the achievable false-positive rate of sequentially performed EIA-WB tests can be less than 0.1% or less than 1/1,000 persons tested.

REFERENCES

- 1. Centers for Disease Control (1992). 1993 Revised classification system for HIV infection and expanded surveillance case definition for AIDS among adolescents and adults. Mortality and Morbidity Weekly Report Volume 41:RR-17.
- 2. Centers for Disease Control (1989). Interpretation and use of Western Blot Assay for serodiagnosis of Human Immunodeficiency Virus Type 1 infections. Morbidity and Mortality Weekly Report, Volume 38:S-7.

Page 7 PLA-209 DC 06.15

HIV ANTIBODY TESTING COUNSELING REFERRALS

Clinica Pueblo 1470 Irving Street, N.W. Washington, D.C. 20010

462-4788

Planned Parenthood 1108 16th Street N.W. Washington, D.C. 20036

347-8512

Southwest Health Center 850 Delaware Ave. S.W. Washington, D.C. 20024

727-3611

Washington Free Clinic 1525 Newton Street N.W. Washington, D.C. 20010 667-1106

Whitman-Walker Clinic 1407 S Street, N.W. Washington, D.C. 20009 332-5295 Anonymous

Comprehensive pre and post-test counseling

Free

Walk-in and appointments

Results in 10 days

Anonymous

Comprehensive pre and post-test counseling

\$40

Appointment required

Results in 72 hours to 1 week

Anonymous

Counseling is by a physician or a counselor

Walk-in and appointments

Results in 2 weeks

Anonymous

Comprehensive pre and post-test counseling

Free

Walk-in and appointments

Results in 1 week

Anonymous

Comprehensive pre and post-test counseling, as well as short-term (up to 8 sessions)

Crisis intervention oriented post-test counseling.

Free, although donation requested

Appointment required.

Results in 48 hours or 1 week (depending on

appointment schedule)



Primerica Life Insurance Company

Executive Office: 1 Primerica Parkway Duluth, Georgia 30099-0001 1-800-257-4725 Access your policy at myprimerica.com

DISTRICT OF COLUMBIA LIFE & HEALTH INSURANCE GUARANTY ASSOCIATION ACT OF 1992

SUMMARY OF GENERAL PURPOSES, COVERAGE LIMITATIONS AND CONSUMER PROTECTION

General Purposes

Residents of the District of Columbia should know that licensed insurers who sell health insurance, life insurance, and annuities in the District of Columbia are members of the District of Columbia Life and Health Insurance Guaranty Association ("Guaranty Association").

The purpose of the Guaranty Association is to provide statutorily-determined benefits associated with covered policies and contracts in the unlikely event that a member insurer is unable to meet its financial obligations and is found by a court of law to be insolvent. When a member insurer is found by a court to be insolvent, the Guaranty Association will assess the other member insurers to satisfy the benefits associated with any outstanding covered claims of persons residing in the District of Columbia. However, the protection provided through the Guaranty Association is subjected to certain statutory limits explained under "Coverage Limitations" section, below. In some cases, the Guaranty Association may facilitate the reassignment of policies or contracts to other licensed insurance companies to keep the coverage in-force, with no change in contractual rights or benefits.

Coverage

The Guaranty Association, established pursuant to the Life and Health Guaranty Association Act of 1992 ("Act"), effective July 22, 1992 (D.C. Law 9-129; D.C. Official Code § 31-5401 et seq.), provides insolvency protection for certain types of insurance policies and contracts.

The insolvency protections provided by the Guaranty Association is generally conditioned on a person being 1) a resident of the District of Columbia and 2) the individual insured or owner under a health insurance, life insurance, or annuity contract issued by a member insurer, or insured under a group policy insurance contract issued by a member insurer. Beneficiaries, payees, or assignees of District insureds are also covered under the Act, even if they reside in another state.

Coverage Limitations

The Act also limits the amount the Guaranty Association is obligated to pay. The benefits for which the Guaranty Association may become liable shall be limited to the lesser of:

- The contractual obligations for which the insurer 0000is liable or for which the insurer would have been liable if it were not an impaired or insolvent insurer; or
- With respect to any one life, regardless of the number of policies, contracts, or certificates:
 - > \$300,000 in life insurance death benefits for any one life; including net cash surrender or net cash withdrawal values;
 - > \$300,000 in the present value of annuity benefits, including net cash surrender or net cash withdrawal values;
 - > \$300,000 in the present value of structured settlement annuity benefits, including net cash surrender or net cash withdrawal values;
 - \$300,000 for long-term care insurance benefits;
 - \$300,000 for disability insurance benefits;
 - \$500,000 for basic hospital, medical, and surgical insurance, or major medical insurance benefits;
 - > \$100,000 for coverage not defined as disability insurance or basic hospital, medical and surgical insurance or major medical insurance or long term care insurance including any net cash surrender and net cash withdrawal values.

In no event is the Guaranty Association liable for more than \$300,000 in benefits with respect to any one life (\$500,000 in the event of basic hospital, medical and surgical insurance or major medical insurance).

Additionally, the Guaranty Association is not obligated to cover more than \$5,000,000 for multiple non-group policies of life insurance with one owner of regardless of the number of policies owned.

Exclusions Examples

Policy or contract holders are not protected by the Guaranty Association if:

- They are eligible for protection under the laws of another state (this may occur when the insolvent insurer was domiciled in a state whose guaranty association law protects insureds that live outside of that state);
- Their insurer was not authorized to do business in the District of Columbia; or
- Their policy was issued by a charitable organization, a fraternal benefit society, a mandatory state pooling plan, a mutual assessment company, an insurance exchange, a non-profit hospital or medical service organization, a health maintenance organization, or a risk retention group.

The Guaranty Association also does not cover:

- Any policy or portion of a policy which is not guaranteed by the insurer or for which the individual has assumed the risk;
- Any policy of reinsurance (unless an assumption certificate was issued);
- Any plan or program of an employer or association that provides life, health, or annuity benefits to its employees or members and is self-funded;
- Interest rate guarantees which exceed certain statutory limitations;

- Dividends, experience rating credits or fees for services in connection with a policy;
- Credits given in connection with the administration of a policy by a group contract holder; or
- Unallocated annuity contacts.

Consumer Protection

To learn more about the above referenced protections, please visit the Guaranty Association's website at **www.dclifega.org**. Additional questions may be directed to the District of Columbia Department of Insurance, Securities and Banking (DISB) and they will respond to questions not specifically addressed in this disclosure document.

Policy or contract holders with additional questions may contact either:

District of Columbia Department of Insurance, Securities and Banking 810 First Street, N.E., Suite 701 Washington DC 20002 (202) 727-8000 District of Columbia Life and Health Guaranty Association 1200 G Street, N.W. Washington DC 20005 (202) 434-8771

Pursuant to the Act (D.C. Official Code § 31-5416), insurers are required to provide notice to policy and contract holders of the existence of the Guaranty Association and the amounts of coverage provided under the Act. Your insurer and agent are prohibited by law from using the existence of the Guaranty Association and the protection it provides to market insurance products. You should not rely on the insolvency protection provided under the Act when selecting an insurer or insurance product. If you have obtained this document from an agent in connection with the purchase of a policy or contract, you should be aware that such delivery does not guarantee that the Guaranty Association would cover your policy or contract. Any determination of whether a policy or contract will be determined solely by the coverage provisions of the Act.

This disclosure is intended to summarize the general purpose of the Act and does not address all the provisions of the Act. Moreover, the disclosure is not intended and should not be relied upon to alter any rights established in any policy or contract or under the Act.

Life Insurance Buyer's Guide

This guide can help you when you shop for life insurance. It discusses how to:

- Find a Policy That Meets Your Needs and Fits Your Budget
- · Decide How Much Insurance You Need
- Make Informed Decisions When You Buy a Policy

Prepared by the National Association of Insurance Commissioners

The National Association of Insurance Commissioners is an association of state insurance regulatory officials. This association helps the various insurance departments to coordinate insurance laws for the benefit of all consumers.

This quide does not endorse any company or policy.

Reprinted by

Primerica Life Insurance Company

Executive Offices - Duluth, Georgia 30099-0001 December 2005

IMPORTANT THINGS TO CONSIDER

- 1. Review your own insurance needs and circumstances. Choose the kind of policy that has benefits that most closely fit your needs. Ask an agent or company to help you.
- 2. Be sure that you can handle premium payments. Can you afford the initial premium? If the premium increases later and you still need insurance, can you still afford it?
- 3. Don't sign an insurance application until you review it carefully to be sure all the answers are complete and accurate.
- 4. Don't buy life insurance unless you intend to stick with your plan. It may be very costly if you quit during the early years of the policy.
- 5. Don't drop one policy and buy another without a thorough study of the new policy and the one you have now. Replacing your insurance **may be costly**.
- 6. Read your policy carefully. Ask your agent or company about anything that is not clear to you.
- 7. Review your life insurance program with your agent or company every few years to keep up with changes in your income and your needs.

Buying Life Insurance

When you buy life insurance, you want coverage that fits your needs.

First, decide how much you need—and for how long—and what you can afford to pay. Keep in mind the major reason you buy life insurance is to cover the financial effects of unexpected or untimely death. Life insurance can also be one of many ways you plan for the future.

Next, learn what kinds of policies will meet your needs and pick the one that best suits you.

Then, choose the combination of policy premium and benefits that emphasizes protection in case of early death, or benefits in case of long life, or a combination of both.

It makes good sense to ask a life insurance agent or company to help you. An agent can help you review your insurance needs and give you information about the available policies. If one kind of policy doesn't seem to fit your needs, ask about others.

This guide provides only basic information. You can get more facts from a life insurance agent or company or from your public library.

What About the Policy You Have Now?

If you are thinking about dropping a life insurance policy, here are some things you should consider:

- If you decide to replace your policy, don't cancel your old policy until you have received the new one. You then have a minimum period to review your new policy and decide if it is what you wanted.
- It may be costly to replace a policy. Much of what you paid in the early years of the policy you have now, paid for the company's cost of selling and issuing the policy. You may pay this type of cost again if you buy a new policy.
- Ask your tax advisor if dropping your policy could affect your income taxes.
- If you are older or your health has changed, premiums for the new policy will often be higher. You will not be able to buy a new policy if you are not insurable.
- You may have valuable rights and benefits in the policy you now have that are not in the new one.

Page 11 PLA-209 DC 06.15

- If the policy you have now no longer meets your needs, you may not have to replace it. You might be able to change your policy or add to it
 to get the coverage or benefits you now want.
- At least in the beginning, a policy may pay no benefits for some causes of death covered in the policy you have now.

In all cases, if you are thinking of buying a new policy, check with the agent or company that issued you the one you have now. When you bought your old policy, you may have seen an illustration of the benefits of your policy. Before replacing your policy, ask your agent or company for an updated illustration. Check to see how the policy has performed and what you might expect in the future, based on the amounts the company is paying now.

How Much Do You Need?

Here are some questions to ask yourself:

- How much of the family income do I provide? If I were to die early, how would my survivors, especially my children, get by? Does anyone else depend on me financially, such as a parent, grandparent, brother or sister?
- Do I have children for whom I'd like to set aside money to finish their education in the event of my death?
- How will my family pay final expenses and repay debts after my death?
- Do I have family members or organizations to whom I would like to leave money?
- Will there be estate taxes to pay after my death?
- · How will inflation affect future needs?

As you figure out what you have to meet these needs, count the life insurance you have now, including any group insurance where you work or veteran's insurance. Don't forget Social Security and pension plan survivor's benefits. Add other assets you have: savings, investments, real estate and personal property. Which assets would your family sell or cash in to pay expenses after your death?

What Is the Right Kind of Life Insurance?

All policies are not the same. Some give coverage for your lifetime and others cover you for a specific number of years. Some build up cash values and others do not. Some policies combine different kinds of insurance, and others let you change from one kind of insurance to another. Some policies may offer other benefits while you are still living. Your choice should be based on your needs and what you can afford.

There are two basic types of life insurance: **term insurance** and **cash value insurance**. Term insurance generally has lower premiums in the early years, but does not build up cash values that you can use in the future. You may combine cash value life insurance with term insurance for the period of your greatest need for life insurance to replace income.

Term Insurance covers you for a term of one or more years. It pays a death benefit only if you die in that term. Term insurance generally offers the largest insurance protection for your premium dollar. It generally does not build up cash value.

You can renew most term insurance policies for one or more terms even if your health has changed. Each time you renew the policy for a new term, premiums may be higher. Ask what the premiums will be if you continue to renew the policy. Also ask if you will lose the right to renew the policy at some age. For a higher premium, some companies will give you the right to keep the policy in force for a guaranteed period at the same price each year. At the end of that time you may need to pass a physical examination to continue coverage, and premiums may increase.

You may be able to trade many term insurance policies for a cash value policy during a conversion period-even if you are not in good health. Premiums for the new policy will be higher than you have been paying for the term insurance.

Cash Value Life Insurance is a type of insurance where the premiums charged are higher at the beginning than they would be for the same amount of term insurance. The part of the premium that is not used for the cost of insurance is invested by the company and builds up a cash value that may be used in a variety of ways. You may borrow against a policy's cash value by taking a policy loan. If you don't pay back the loan and the interest on it, the amount you owe will be subtracted from the benefits when you die, or from the cash value if you stop paying premiums and take out the remaining cash value. You can also use your cash value to keep insurance protection for a limited time or to buy a reduced amount without having to pay more premiums. You also can use the cash value to increase your income in retirement or to help pay for needs such as a child's tuition without canceling the policy. However, to build up this cash value, you must pay higher premiums in the earlier years of the policy. Cash value life insurance may be one of several types; whole life, universal life and variable life are all types of cash value insurance.

Whole Life Insurance covers you for as long as you live if your premiums are paid. You generally pay the same amount in premiums for as long as you live. When you first take out the policy, premiums can be several times higher than you would pay initially for the same amount of term insurance. But they are smaller than the premiums you would eventually pay if you were to keep renewing a term policy until your later years.

Some whole life policies let you pay premiums for a shorter period such as 20 years, or until age 65. Premiums for these policies are higher since the premium payments are made during a shorter period.

Universal Life Insurance is a kind of flexible policy that lets you vary your premium payments. You can also adjust the face amount of your coverage. Increases may require proof that you qualify for the new death benefit. The premiums you pay (less expense charges) go into a policy account that earns interest. Charges are deducted from the account. If your yearly premium payment plus the interest your account earns is less than the charges, your account value will become lower. If it keeps dropping, eventually your coverage will end. To prevent that, you may need to start making premium payments, or increase your premium payments, or lower your death benefits. Even if there is enough in your account to pay the premiums, continuing to pay premiums yourself means that you build up more cash value.

Page 12 PLA-209 DC 06.15

Variable Life Insurance is a kind of insurance where the death benefits and cash values depend on the investment performance of one or more separate accounts, which may be invested in mutual funds or other investments allowed under the policy. Be sure to get the prospectus from the company when buying this kind of policy and STUDY IT CAREFULLY. You will have higher death benefits and cash value if the underlying investments do well. Your benefits and cash value will be lower or may disappear if the investments you chose didn't do as well as you expected. You may pay an extra premium for a quaranteed death benefit.

Life Insurance Illustrations

You may be thinking of buying a policy where cash values, death benefits, dividends or premiums may vary based on events or situations the company does not guarantee (such as interest rates). If so, you may get an illustration from the agent or company that helps explain how the policy works. The illustration will show how the benefits that are not guaranteed will change as interest rates and other factors change. The illustration will show you what the company guarantees. It will also show you what *could* happen in the future. Remember that nobody knows what will happen in the future. You should be ready to adjust your financial plans if the cash value doesn't increase as quickly as shown in the illustration. You will be asked to sign a statement that says you understand that some of the numbers in the illustration are not guaranteed.

Finding a Good Value in Life Insurance

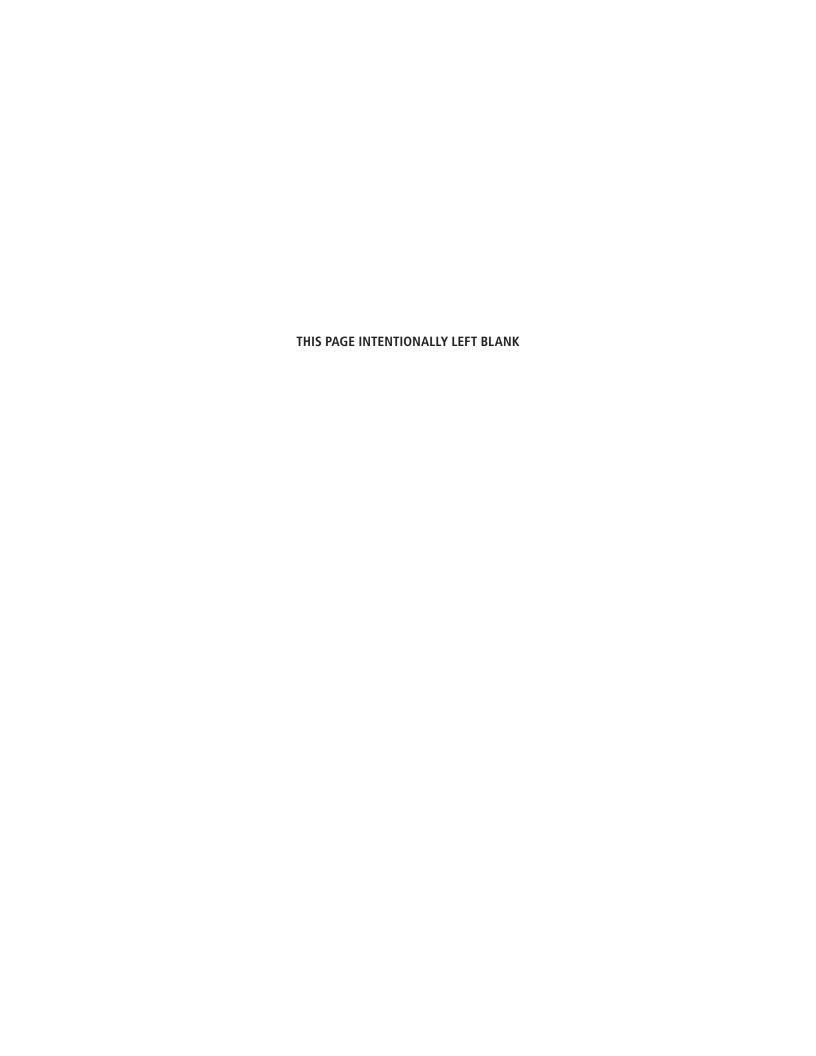
After you have decided which kind of life insurance is best for you, compare similar policies from different companies to find which one is likely to give you the best value for your money. A simple comparison of the premiums is not enough. There are other things to consider. For example:

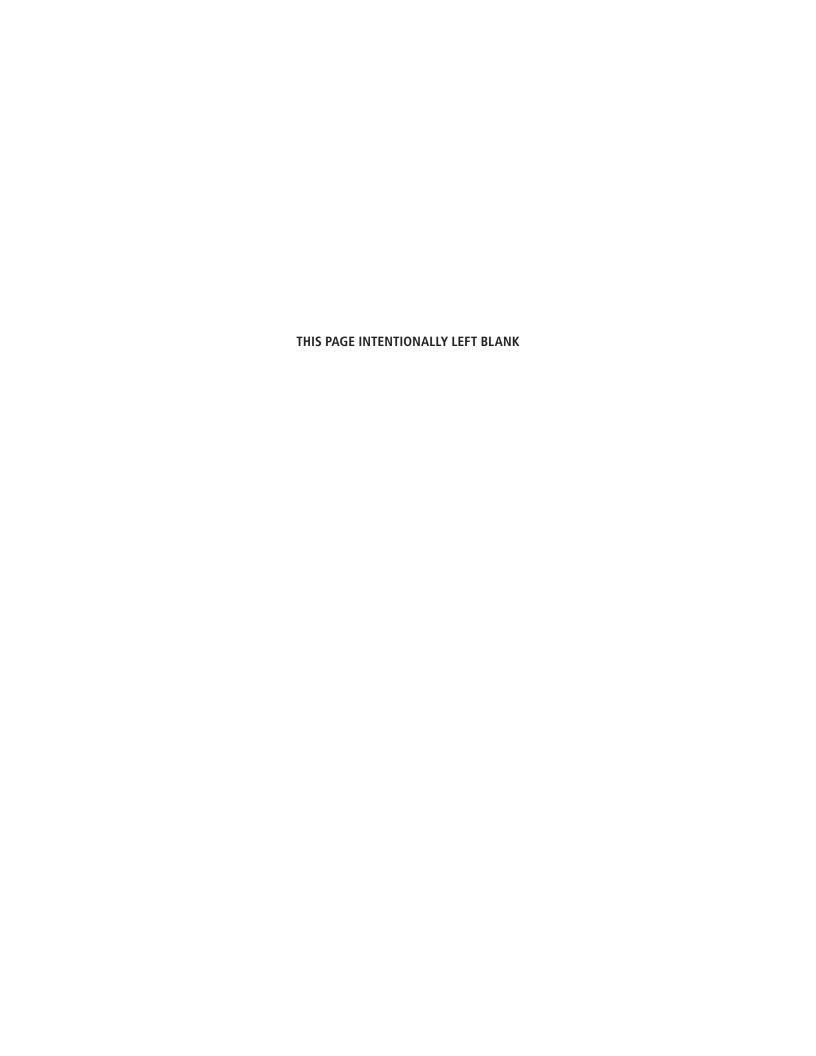
- Do premium or benefits vary from year to year?
- How much do the benefits build up in the policy?
- · What part of the premiums or benefits is not guaranteed?
- · What is the effect of interest on money paid and received at different times on the policy?

Remember that no one company offers the lowest cost at all ages for all kinds and amounts of insurance. You should also consider other factors:

- How quickly does the cash value grow? Some policies have low cash values in the early years that build quickly later on. Other policies have
 a more level cash value build-up. A year-by-year display of values and benefits can be very helpful. (The agent or company will give you a
 policy summary or an illustration that will show benefits and premiums for selected years.)
- Are there special policy features that particularly suit your needs?
- How are nonguaranteed values calculated? For example, interest rates are important in determining policy returns. In some companies
 increases reflect the average interest earnings on all of that company's policies regardless of when issued. In others, the return for policies
 issued in a recent year, or a group of years, reflects the interest earnings on that group of policies; in this case, amounts paid are likely to
 change more rapidly when interest rates change.

Page 13 PLA-209 DC 06.15









Primerica Life Insurance Company
Office of the General Counsel
1 Primerica Parkway
Duluth, GA 30099-0001
NAIC #041-65919

Tel 1 866 230 6617 Tel 770 564-7941 Fax 770 564 7948

November 25, 2017

Re: Attached Filing Submission

Please accept this letter as authorization from Primerica Life Insurance Company for McHugh Consulting Resources, Inc. to file any or all policy forms/rates as referenced in the corresponding SERFF filing on behalf of Primerica Life Insurance Company.

Sincerely,

Steven A. Reidich Senior Vice President

How feiled